

# SSI Claim Screen Package Deferred Claim

5/20/2021

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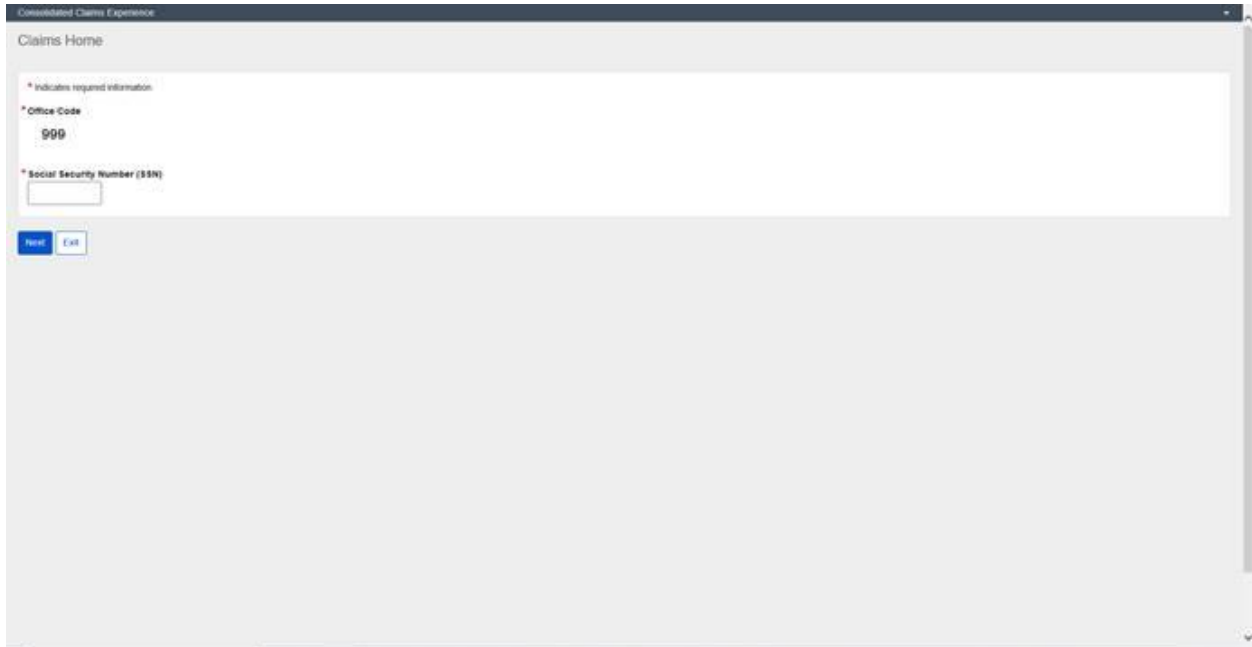
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## A. Log in Information

### 1. Claims Home

This page is used to input a Social Security Number (SSN) to establish or review claim(s).

**Note:** “\* indicates required information” means the fields are mandatory.



The screenshot shows a web browser window titled "Consolidated Claims Experience" with a sub-header "Claims Home". The main content area is a light gray box containing a form. At the top of the form, there is a note: "\* Indicates required information". Below this, there are two mandatory fields: "Office Code" with a text input field containing "999", and "Social Security Number (SSN)" with an empty text input field. At the bottom left of the form, there are two buttons: a blue "Next" button and a white "Exit" button.

## 2. Claims Summary

The Claims Summary page allows you to view, manage, and establish claims.

The screenshot shows a web interface titled "Consolidated Claims Experience" with a home icon. The main heading is "Claims Summary". Below this is a table with two columns: "Requested Social Security Number (SSN)" and "Name". The table is currently empty. Underneath the table, there are two sections: "T2/T18 Claims" and "T16 Claims". The "T2/T18 Claims" section contains a cyan message box with an information icon and the text: "CCE Exclusion. This individual has not attained 64 and 8 months of age. To take appropriate action, select Exit and go to MCS." The "T16 Claims" section contains a cyan message box with an information icon and the text: "Requested SSN has no active claim file or Supplemental Security Income Record. To establish a new claim, select 'Establish New SSI Claim' button below." Below this message is a button labeled "Establish New SSI Claim". At the bottom left of the page is an "Exit" button.

# B. General Identification

## 1. Person Information

Person Information captures and displays data related to an individual's identity, contact information, citizenship, military service, and special accommodation needs. The Person Information page enables the user to view, and when applicable, update an individual's information. It also displays death information.

SSI Claims

Go To **General Identification** Living Arrangements Resources Income Benefit Loads Summary Claim Edits and Alerts

Person Information

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Person Information on Record for

**Identity Information** Edit

Social Security Number:  
Multiple SSN(s):  
Name:  
Other Names:  
Sex:  
Birth Date:  
Birth Place:  
Birth Date Proof:  
Birth Date Proof Type:  
Parent/Mother's Name at Her Birth:  
Parent/Father's Name:

Go to [Social Security Number Application Process \(SSNAP\)](#) to update identity information, when required evidence is available.  
Go to [NUMI Query](#) to view the historical enumeration information.

**Death Information** Edit

No death information exists for this person.

**Citizenship Information** Edit

Citizenship Details

Citizenship Country	U.S. Citizenship Basis	U.S. Citizenship Proof	Start Date	End Date

**Contact Information** Edit

Addresses on Record

Address	Purpose	Effective Date
	Most Recently Provided Mailing T16 Mailing	

Primary Phone Number:  
TTY Number:  
Receive Text Message:  
Receive Voice Message:  
Primary Phone Number Remarks:  
Alternate Phone Number:  
TTY Number:  
Receive Text Message:  
Receive Voice Message:  
Alternate Phone Number Remarks:  
Email:  
Spoken Language Preference:  
Written Language Preference:   
Special Notice Option:

**Go to iAccommodate to update SNO.**

**Military Service Information**

Department of Defense (DoD) Wounded Warrior:  
Veterans Affairs 100% Permanent and Total Disability Compensation Rating:

**Accommodation Information** Edit

Add or update notice option due to visual impairment?  
 Yes  No

Active Accommodations

Active Accommodations	Request Date
No records found.	

Non-Standard Accommodations

Non-Standard Accommodations	Request Date	Status
No records found.		

Accept

Next Previous Save & Exit

## a. Identity Information editing

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Person Information

Name Social Security Number (SSN) Role Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Identity Information

\* Indicates required information

**Social Security Number**

\* **Name Type**

Full Name  
 Single Name

\* **Name**

\* First  Middle  \* Last  Suffix

**Other Names - Alleged Names** [More Info](#)  
Maximum of 5 Other Names can be entered

Other Name Type	First Name	Middle Name	Last Name	Suffix	Action
No records found					

[Add Other Name](#)

**Other Names - Official Information on Record** [More Info](#)

Other Name Type	First Name	Middle Name	Last Name	Suffix
No records found.				

\* **Sex**

Male  Female

\* **Birth Date**

mm/dd/yyyy

\* **Birth Place**

U.S. or U.S. Territory  International

\* City/Town  \* State/Territory

\* **Birth Date Proof** [More Info](#)

**Birth Date Proof Type** [More Info](#)

\* **Parent/Mother's Name Type**

Full Name  
 Single Name  
 Name Unknown

\* **Parent/Mother's Name at Her Birth**

\* First  Middle  \* Last  Suffix

\* **Parent/Father's Name Type**

Full Name  
 Single Name  
 Name Unknown

\* **Parent/Father's Name**

\* First  Middle  \* Last  Suffix

[Save](#) [Cancel](#)

Next Previous Save & Exit

**Dropdown list:**

- 
- JR
- SR
- I
- II
- III
- IV
- V
- VI
- VII
- VIII
- IX
- X
- XI
- XII
- XIII
- XIV
- XV
- XVI
- XVII

**Birth Date Proof**

- 
- Age established for SSA purposes in a prior claim which warrants current coding of "F" according to POMS GN 00302.011 (F)
- Age established, but no other code applies (Q)
- Alleged (A)
- Convincing Proof (C)
- Preferred Proof (Public or religious record of age established before age 5) (B)

**Birth Date Proof Type**

- 
- Hospital Birth Record (H)
- Notification of Birth Registration (N)
- Other Evidence of Age (including religious records) (O)
- Pre-age 5 State, Local or Foreign Public Birth Certificate (P)

## b. Citizenship Information editing

SSI Claims

Go To **General Identification** Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Person Information

Name Social Security Number (SSN) Role Claimant

General Identification

- Person Information**
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Social Security Number Name

Citizenship Information

Citizenship Details

Citizenship Country	U. S. Citizenship Basis	U. S. Citizenship Proof	Start Date	End Date	Action
					<a href="#">Edit</a> <a href="#">Delete</a>

[Add Citizenship](#)

[Save](#) [Cancel](#)

[Next](#) [Previous](#) [Save & Exit](#)

### Modal window:

Add Citizenship Information

\* Indicates required information

\* **U.S. Citizenship**

Yes  No

\* **U.S. Citizenship Basis**

--

\* **U.S. Citizenship Proof**

--

\* **Citizenship Start Date**

This date can typically be a birthdate

mm/dd/yyyy

\* **Citizenship Ended**

Yes  No

[OK](#) [Cancel](#)

### Dropdown list:

## U.S. Citizenship Basics

Birth in U.S. U.S. Citizen Born Outside U.S. Naturalization, Granted by Court, Department of Homeland Security, or Presidential Proclamation

## U.S. Citizenship Proof

Allegation No Proof Enumeration Record Prior Social Security Claim with Proven Citizenship U.S. Passport Birth/Baptismal Record Naturalization Record Certificate of Citizenship Consular Report of Birth Abroad (FS-240) Other Certification of Report of Birth (DS-1350)

## c. Contact Information editing

SSI Claims

Go To **General Identification** Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Person Information

Name Social Security Number (SSN) Role  
Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Social Security Number Name

Contact Information

\* Indicates required information

Addresses on Record [More Info](#)

Address	Purpose	Effective Date	Action
	Most Recently Provided Mailing		<a href="#">Edit</a>
	T16 Mailing		<a href="#">Edit</a>

[Manage Addresses](#)

Primary Phone Number

U.S.  International

10-digit Number

TTY Number

Yes  No

Receive a message on this phone by one or more of the following methods

Select All Options

Receive Text Message

Receive Voice Message

Primary Phone Number Remarks  
(250 characters maximum)

Characters remaining: 250

Alternate Phone Number

U.S.  International

10-digit Number

TTY Number

Yes  No

Receive a message on this phone by one or more of the following methods

Select All Options

Receive Text Message

Receive Voice Message

Alternate Phone Number Remarks  
(250 characters maximum)

Characters remaining: 250

Email

\*Spoken Language Preference

\*Written Language Preference

Special Notice Option  
None

[Save](#) [Cancel](#)

[Next](#) [Previous](#) [Save & Exit](#)

### Modal Window:

Add New Address

**\* Address**

**\* Country**

**\* Line 1**  **Line 2**

**Line 3**  **Line 4**

**\* City/Town**  **\* State/Territory**

**\* ZIP Code**

**State and County Code**

**\* Apply this Address to all applicable purposes**  
 T16 Mailing

Edit T16 Mailing

**Manage Addresses**

---

**\* Indicates required information**

**\* Select one of the addresses below or enter a new address**

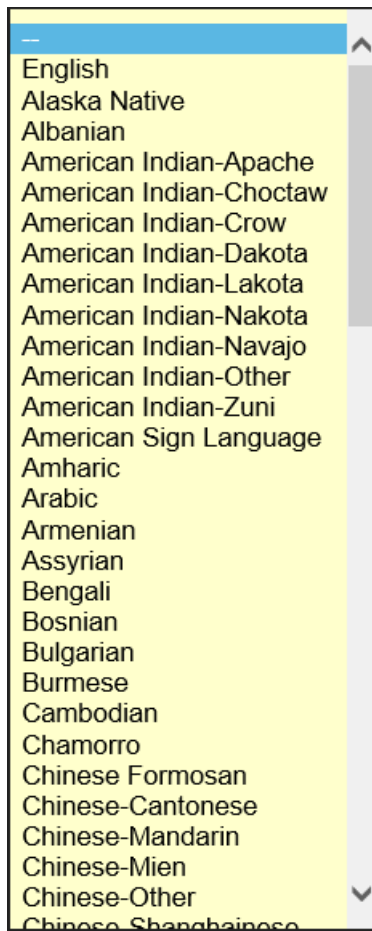
Add New Address

**Mailing Address you entered**

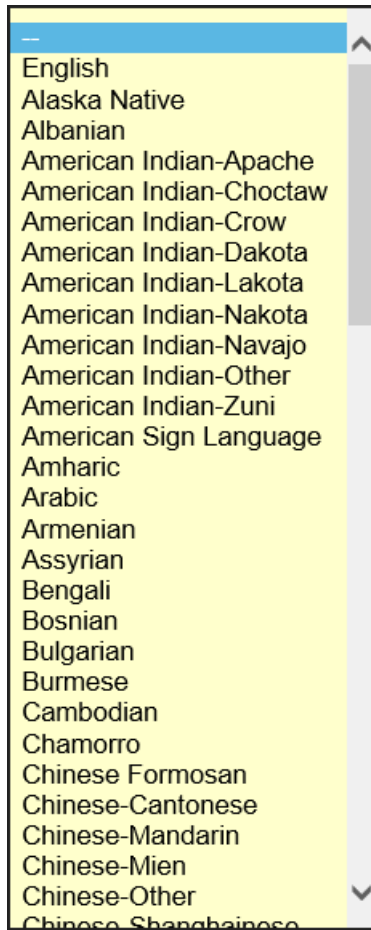
**\* Apply this Address to all applicable purposes**  
 T16 Mailing

**Dropdown list:**

Spoken Language Preference

- 
- English
  - Alaska Native
  - Albanian
  - American Indian-Apache
  - American Indian-Choctaw
  - American Indian-Crow
  - American Indian-Dakota
  - American Indian-Lakota
  - American Indian-Nakota
  - American Indian-Navajo
  - American Indian-Other
  - American Indian-Zuni
  - American Sign Language
  - Amharic
  - Arabic
  - Armenian
  - Assyrian
  - Bengali
  - Bosnian
  - Bulgarian
  - Burmese
  - Cambodian
  - Chamorro
  - Chinese Formosan
  - Chinese-Cantonese
  - Chinese-Mandarin
  - Chinese-Mien
  - Chinese-Other
  - Chinese-Shanghaiese

## Written Language Preference



A scrollable list of written language preferences. The list is contained within a rectangular box with a light yellow background and a grey scrollbar on the right side. The top of the list is highlighted in blue. The list items are as follows:

- English
- Alaska Native
- Albanian
- American Indian-Apache
- American Indian-Choctaw
- American Indian-Crow
- American Indian-Dakota
- American Indian-Lakota
- American Indian-Nakota
- American Indian-Navajo
- American Indian-Other
- American Indian-Zuni
- American Sign Language
- Amharic
- Arabic
- Armenian
- Assyrian
- Bengali
- Bosnian
- Bulgarian
- Burmese
- Cambodian
- Chamorro
- Chinese Formosan
- Chinese-Cantonese
- Chinese-Mandarin
- Chinese-Mien
- Chinese-Other
- Chinese-Shanghaiese

## d. Accommodation Information editing

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

**Person Information**

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**General Identification**

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

**Social Security Number**      **Name**

---

**Request For Reasonable Accommodation**

1 Provide Information    2 Review Information    3 Confirmation

Paperwork Reduction Act | Privacy Act

---

**Request Information**

\*Request Date

\*Office Code where accommodation is requested

**Please select, enter, or modify, at least one of the accommodation options listed below. Select the associated impairment type.**

---

**Accommodation Approved Today**

[Special Notice Options Help](#)

Complete this section when a notice accommodation is requested by or for a claimant, beneficiary, applicant, recipient, or representative payee who is blind or visually-impaired.  
NOTE: Organizational representative payees ARE NOT eligible for special notice options.  
If none of these options are adequate, please visit the [SNO Website](#).

**For Applicants, Beneficiaries, Recipients or Representative Payees**  
Policy information relating to SNO can be referenced from [POMS](#) [HALLEX](#) [TSCOG](#)

- Standard print notices sent by first-class mail
- Standard print notices sent by certified mail
- Standard print notices sent by first-class mail and a follow-up telephone call within 5 business days to read the client the notice
- Standard print notices and Braille notices sent by first-class mail
- Standard print notices and data compact discs (CDs) that contain a Microsoft Word file sent by first-class mail
- Standard print notices and audio compact discs (CDs) that contain a voice recording of the notice sent by first-class mail
- Standard print notices and large print (18-point font) notices sent by first-class mail

Impairment Type

Use the "Non-Standard Accommodations" section below when a special notice option is requested by or for

- Someone other than a claimant, beneficiary, applicant, recipient, or individual representative payee, or
- Is based on an impairment other than blindness or visual impairment.

---

[Standard Accommodation Help](#)

If required, select one or more Standard Accommodation(s).

Standard Accommodation	Impairment Type	Provided
<input type="checkbox"/> Test standard Accommodation creation with maximum input values allowed with accommodation name for local individuals located within in the city and the area limit	--	<input type="checkbox"/>
<input type="checkbox"/> Test accommodation	--	<input type="checkbox"/>
<input type="checkbox"/> Certified and Qualified Sign Language Interpreter	--	<input type="checkbox"/>
<input type="checkbox"/> Certified and Qualified Video Remote Sign Language Interpreter (VRI)	--	<input type="checkbox"/>
<input type="checkbox"/> Handwritten notes	--	<input type="checkbox"/>
<input type="checkbox"/> Lip reading or speech reading	--	<input type="checkbox"/>

---

[Locally-Available Accommodation Help](#)

If required, select one or more Locally-Available Accommodation. (These may not be available in every office.)

Locally-Available Accommodation	Impairment Type	Provided
<input type="checkbox"/> xxxxxx	--	<input type="checkbox"/>
<input type="checkbox"/> test	--	<input type="checkbox"/>
<input type="checkbox"/> aaaaa	--	<input type="checkbox"/>
<input type="checkbox"/> Social Security employee who is a Qualified Sign Language Interpreter	--	<input type="checkbox"/>
<input type="checkbox"/> Social Security employee who knows American Sign Language (ASL)	--	<input type="checkbox"/>
<input type="checkbox"/> CapTel service	--	<input type="checkbox"/>
<input type="checkbox"/> Real-time Court Reporting	--	<input type="checkbox"/>
<input type="checkbox"/> UbiDuo face-to-face communicator	--	<input type="checkbox"/>

---

[Other Accommodation Help](#)

If required, describe any other accommodation that SSA can provide today. Only document accommodations provided by SSA.

Other Accommodation	Impairment Type	Provided	Actions
<input type="text"/>	--	<input type="checkbox"/>	<input type="button" value="Remove"/>

If none of the above accommodations meet the requirement, please create Non Standard Accommodation by clicking on below button.

17

**Dropdown list:**

Impairment Type

- 
- Blind or Visually Impaired
- Deaf or Hard of Hearing
- Cognitive or Learning
- Mobility or Physical
- Psychological or Emotional
- Other

## 2. Supplemental Security Income Application - Deferred

This page collects the type of application being processed, and the date the claim was established. Additionally, it collects information about the non-claimant applicant.

The screenshot shows the 'Supplemental Security Income Application' form. At the top, there is a navigation bar with tabs: 'Go To', 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. Below the navigation bar, the form title is 'Supplemental Security Income Application'. A table header shows 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. The main form area is divided into a left sidebar and a main content area. The sidebar, titled 'General Identification', contains a list of categories: 'Person Information', 'SSI Application' (selected), 'Disability', 'Multiple SSNs', 'Residency & Presence in the U.S.', 'Advance Designation', 'Financial Permission', 'Personal Information Authorization', 'Wage Authorization', 'Felony Warrant', 'Child's Parents', 'Marriage (0)', and 'Holding Out (0)'. The main content area contains several required fields: 'Application type' (dropdown menu with 'Deferred' selected), 'Protective filing date' (text input field with placeholder 'mm/dd/yyyy'), 'Effective filing date' (text input field with placeholder 'mm/dd/yyyy'), and 'Applicant type' (dropdown menu). Below these fields are two expandable sections: 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). At the bottom of the main content area is an 'Undo Changes' button. At the bottom of the entire form are three buttons: 'Next', 'Previous', and 'Save & Exit'.

### Dropdown list:

Application Type

The screenshot shows a dropdown menu for 'Application Type'. The menu is open, displaying three options: 'Abbreviated', 'Deferred', and 'Full'. The 'Deferred' option is highlighted in blue.

Applicant Type

The screenshot shows a dropdown menu for 'Applicant Type'. The menu is open, displaying three options: 'Agency', 'Claimant', and 'Other Individual'. The 'Agency' option is highlighted in blue.

**More Info link:**

Application type ✕

Select an Application Type of:

- 'Full' for claims involving simultaneous development. See [POMS SI 00603.002 Explanation of Deferred and Simultaneous Development](#) for more information.
- 'Deferred' for claims that do not meet requirements for simultaneous development. See [POMS SI 00603.002.C Explanation of Deferred and Simultaneous Development](#) for more information.
- 'Abbreviated' to formally deny Title XVI benefits for certain nonmedical reasons when the applicant alleges information that clearly results in ineligibility. See [POMS SI 00602.001 The Abbreviated Application Process](#) for more information.

Close

Protective filing date ✕

The Protective filing date documents the claimant's first date of inquiry with an intent to apply for SSI benefits. See [POMS GN 00204.010 Protective Filing](#) for more information.

Close

Effective filing date ✕

The Effective Filing Date documents the date the claimant or claimant spouse files an application for SSI benefits. In most cases it will be the same as the Protective Filing Date. See [POMS SI 00601.009 Application Effective Date](#) for more information.

Close

### 3. Disability

This page documents the allegation of disability or blindness, the onset date alleged by the individual, the SSA employee's decision regarding the disposition of the medical portion of the file, and the date the field office sent the file for a medical decision.

Once in the path, this page remains in the path and the user cannot remove the page.

SSI Claims

Go To: [General Identification](#) [Living Arrangements](#) [Resources](#) [Income](#) [Benefit Leads](#) [Summary](#) [Claim Edits and Alerts](#)

#### Disability

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**General Identification**

- [Person Information](#)
- [SSI Application](#)
- Disability**
- [Multiple SSNs](#)
- [Residency & Presence in the U.S.](#)
- [Advance Designation](#)
- [Financial Permission](#)
- [Personal Information Authorization](#)
- [Wage Authorization](#)
- [Felony Warrant](#)
- [Marriage \(0\)](#)
- [Holding Out \(0\)](#)

**Allegations**

**Disabled**

Yes  No

**Blind or low vision** [More Info](#)  
Includes blindness and severe visual impairment even with glasses or contacts

Yes  No

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

## Refer case for medical decision is No

SSI Claims

Go To: [General Identification](#) [Living Arrangements](#) [Resources](#) [Income](#) [Benefit Leads](#) [Summary](#) [Claim Edits and Alerts](#)

Disability

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

General Identification

- [Person Information](#)
- [SSI Application](#)
- Disability**
- [Multiple SSNs](#)
- [Residency & Presence in the U.S.](#)
- [Advance Designation](#)
- [Financial Permission](#)
- [Personal Information Authorization](#)
- [Wage Authorization](#)
- [Felony Warrant](#)
- [Marriage \(0\)](#)
- [Holding Out \(0\)](#)

**Indicates required information**

**Allegations**

**Disabled**  
 Yes  No

**Blind or low vision** [Store info](#)  
Includes blindness and severe visual impairment even with glasses or contacts  
 Yes  No

**Alleged onset date**  
mm/dd/yyyy  Unknown

**Disabled prior to age 22**  
 Yes  No  Unknown

**Refer case for medical decision**  
 Yes  No  Decide later

**Reason not referred**  
-

**Show person remarks**  
No remarks

**Show file documentation notes**  
No notes

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

### **Dropdown list:**

Reason not referred

—
Adopt title II disability determination
Converted welfare case
Denied for non-medical reason

### **More Info link:**

### More Info - Blind or low vision



Statutory blindness:

- Central visual acuity of 20/200 or less in the better eye after best correction
- A limitation in the field of vision such that the widest diameter of the visual field subtends an angle no greater than 20 degrees in the better eye

Other considerations if blindness is established:

- No substantial gainful activity limitation applies see [POMS DI 10501.001 Meaning of SGA and Scope of Subchapter](#) ,
- [POMS DI 11005.070D Field Office Title II and Title XVI Disability Claims for Blindness and Visual Impairment Allegations](#) ,
- [POMS DI 26005.005B Title XVI Statutory Blindness Evaluation Issues](#)
- Blind work expenses are more favorable than income related work expenses because they reduce countable earnings dollar for dollar in SSI eligibility and payment computations, see [POMS SI 00820.535 Blind Work Expenses \(BWE\)](#)

Higher state supplements and multi-category eligibility are available in California, Iowa, and Nevada (as well as in Massachusetts prior to 04/01/2012) for statutorily blind recipients:

- [POMS SI 00501.300 Multicategory Eligibility - General Information](#)

### More Info - Claim escalated



- When a claim for benefits based on disability under title II or title XVI is pending at the initial, reconsideration, or hearing level of review and a subsequent claim under the other title is filed, establish whether the claims share a common issue. If the claims share a common issue, consider escalating the claim. See [POMS DI 12045.010 Processing Disability Claims at Different Levels of Appeal, Title II and Title XVI - Common Issue Cases](#) for more information.
- Escalated claims are different from Military Casualty (MC)/Wounded Warrior (WW) cases. See [POMS DI 11005.006 Field Office \(FO\) Instructions for Claims Development and Processing for Military Casualty \(MC\)/Wounded Warrior \(WW\) Cases](#) for more information.

Close

## 4. Children in Deeming Unit

This page collects the number of ineligible children (including children eligible on their own records) who live with or have lived with the claimant since the date indicated.

Children in Deeming Unit

Name	Social Security Number (SSN)	Role
		Ineligible Spouse

General Identification

- SSI Eligibility
- Person Information
- Children in Deeming Unit
- Multiple SSNs
- Sponsored Alien
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Marriage (1)
- Holding Out (0)

\* Indicates required information

\* Number of children, other than the claimant, included in the deeming unit since 02/28/2008 [More info](#)

\* Children

Child SSN	Unknown
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

▼ Show person remarks  
No remarks

▼ Show file documentation notes  
No notes

[Undo Changes](#)

[Next](#) [Previous](#) [Save & Exit](#)

### **More Info link:**

#### Children In Deeming Unit ✕

The number of children in the deeming unit should include the total number of children of deemors (ineligible spouse or parents) for this claim. Do not count the claimant. For initial claims the date displayed is the last day of the month before the month of the Effective Filing Date on the Supplemental Security Income Application page. For post eligibility claims, the date displayed is the last day of the month before the Pending File Begin Date, if present. Otherwise, the date will display the last day of the month before the Effective Filing Date on the Supplemental Security Income Application page.

[Close](#)

**Dropdown list:**

—
0
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
More than 25

## 5. Multiple SSNs

This page collects additional social security numbers that have either been used by or issued to the claimant, claimant spouse, living with parent, deemor children, sponsor, sponsor spouse and/or co-sponsor spouse.

Multiple SSNs

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs**
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

Indicates required information

Other SSNs previously used or issued [More Info](#)

Yes  No  Unknown

Other SSNs used or issued  
At least one row is required

* SSN	* Type	Unknown	Actions
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

### Dropdown list:

Type

Issued  
Used  
Used and Issued

### More Info link:

Multiple SSNs ✕

Other SSNs issued to the individual by SSA are cross-referenced on the SSR. The SSNs must be cross-referred so that the individual's earnings can be properly credited to his/her earnings record.

[Close](#)

## 6. Alien Status

The purpose of this requirement is to determine each month if N13 (Not a citizen or lawfully admitted alien) applies. When N13 does not apply for the month, the person is considered qualified for SSI based on Alien Status. Note: All other factors of SSI eligibility must still be met.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Alien Status

Name	Social Security Number (SSN)	Role Claimant

**General Identification**

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- **Alien Status**
- Residency & Presence in the U.S.
- Payment Method
- Financial Permission
- Personal Information Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)
- Sponsor
- Edits and Alerts

**\* Indicates required information**

**\* U.S. admission date**  
This is the most recent date the claimant entered the United States for residence purposes.

 Unknown

**\* Country of origin**  
This is the country where the Alien resided prior to entering the U.S., or from where the alien filed for refugee or other alien status prior to entering the U.S. It may or may not be the place of birth of the claimant.

**\* Alien status** [List of Alien status codes](#) [Reference: SI 00502.100](#)

- Amerasian immigrant or Iraqi/Alghani special immigrant status  
Class of admission: AM1, AM2, AM3, AM6, AM7, AM8, Class of admission Iraqi/Alghani special immigrant: SI1, SI2, SI3, SI6, SI7, SI8, SI1, SI2, SI3, SI6, SI7, SI8, SI1, SI2, SI3, SI6, SI7, SI8
- Asylee, Section 208 of the Immigration and Nationality Act (INA)  
Class of admission: AS1, AS2, AS3, AS6, AS7, AS8
- Battery, cruelty or Violence Against Women Act petitioner  
Class of admission: IB1, IB2, IB3, IB6, IB7, OB8, IRS, IF1, Z14, DAS
- Continuous U.S. residence since prior to 1/1/1972 (PRUCOL), not eligible unless receiving SSI on 8/22/1996 and continues to meet all eligibility factors
- Cuban or Haitian entrant  
Class of admission: C7P, CC, CNP, CH6, CU0, CU5, CU7, CU8, CU9, CUP, HA6-HA9, HB6-HB9, HC6-HC9, HD6-HD9, HE6-HE9, NC6-NC9
- Deportation withheld under Section 241(b)(3) or removal withheld under Section 243(n) of the Immigration and Nationality Act (INA)  
Class of admission: DAS, ER1, ER2, U, DE, DEFER
- Lawful permanent resident  
Class of admission: IR3, FX3, DV1, AR1, AY1, DT1, E11, GA6, LA6, LB6, IMM, LPR, X03 and including all values in other selections
- Lawful permanent resident, Immigration Reform and Control Act (IRCA) of 1986
- Lawful temporary resident, Immigration Reform and Control Act (IRCA) of 1986; not Special Agricultural Worker (SAW) or Replenishment Agricultural Worker (RAW)  
Class of admission: LTR, TW1, TW2, TS1, TS2
- Legalized Special Agricultural Worker (SAW) or Replenishment Agricultural Worker (RAW), Immigration Reform and Control Act (IRCA) of 1986  
Class of admission: S16, S26, S1W, S2W, TR1, TR2, RAW
- Parolee, Section 212(d)(5) of the Immigration and Nationality Act and not Cuban/Haitian entrant; not eligible unless receiving SSI on 8/22/1996 and continues to meet all eligibility factors  
Class of admission: DE, CC, CH, CP, DA, DT, R3, R4, PR
- Refugee, Section 207 of the Immigration and Nationality Act (INA) or Section 203(a)(7) of the INA prior to 1/1/1980  
Class of admission: Section 203(a)(7) R86, P7, P72, P75, P76, RRA, REF, Section 207: RE1-RE3, RE5-RE9, REF, RE, REUG
- Stay of deportation, non-qualified Alien  
Class of admission: Z13, Z14, Z15, Z56, Z57
- Voluntary departure  
Class of admission: FUG, VD
- No valid DHS status; alleges presence in the U.S. illegally or DHS unaware of presence
- Alleges valid DHS status; status unknown or no other applicable status
- Unknown

**\* Alien status verified**

Yes  No

**\* Alien receiving SSI benefits on 8/22/1996, and who has continued to meet all SSI eligibility factors** [More Info](#)

Yes  No  Unknown

**\* Refugee per Section 207**

Yes  No  Unknown

**Exception met**

**\* Sponsored at any time since 02/28/2012**

Yes  No  Unknown

**\* Sponsor type**  
If sponsor type is employer and the employer is a relative of the claimant, select "person". If the employer is not related to the claimant, select "organization".

**\* Sponsor signed a new version affidavit of support** [More Info](#)  
A new version affidavit of support is a legally enforceable affidavit of support (DHS Form I-864 or similar form) used by DHS for applications for immigrant visas or for adjustments of status filed on or after 12/19/1997. New sponsor deeming rules apply.

**Show person remarks**  
No remarks

**Show file documentation notes**  
No notes

Next Previous Save & Exit

## 7. Residency and Presence in U.S.

This page collects residency and continuous presence in the U.S. data for a claimant during initial claim situations. The data collected, along with other required data, determines eligibility.

Residency and Presence in U.S. (Initial Claim)

Name Social Security Number (SSN) Role Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

Indicates required information

Permanently lives within the 50 States, District of Columbia, or the Northern Mariana Islands [More info](#)

Yes  No

First U.S. residency date   Unknown

mm/dd/yyyy

Resided outside of the U.S. since 04/20/2021

Yes  No  Unknown

Periods Resided Outside the U.S.

Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy)	Unknown	Actions
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<a href="#">Delete</a>

Show person remarks  
No remarks

Show file documentation notes  
No notes

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

### More info link:

Residency and Presence in U.S. (Initial Claim)

**Developing Permanent Home** ✕

Develop if claimant permanently lives in the U.S. for SSI purposes. For more information see [POMS SI 00501.400 Residence and Citizenship Requirement](#)

[Close](#)

## 8. Advanced Designation

SSI Advance Designation is a mini-path function in the SSI Claims system. Advance Designation is automatically placed in the SSI Claims path for the person on the claim when a new claim is established for the person on the claim. When accessing Advance Designation, the user is presented with the Advance Designation of Representative Payee application in establish, update or query mode.

The Advance Designation of Representative Payee application collects advance designation data for the applicants and beneficiaries who do not have a representative payee. If the time comes that they need a representative payee, individuals can be advance designated in priority order. The Advance Designation of Representative Payee application also allows applicants and beneficiaries who have a representative payee to update the phone number of any existing advance designations that are currently present in the application.

### Optional for a deferred claim.

The screenshot displays the SSI Claims system interface for the 'Advance Designation' section. The top navigation bar includes 'Go To' and several menu items: 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The main content area is titled 'Advance Designation' and features a table with columns for 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. Below the table is a sidebar with a list of application steps: 'Person Information', 'SSI Application', 'Disability', 'Multiple SSNs', 'Residency & Presence in the U.S.', 'Advance Designation' (selected), 'Financial Permission', 'Personal Information Authorization', 'Wage Authorization', 'Felony Warrant', 'Marriage (0)', and 'Holding Out (0)'. The main content area shows the 'Advance Designation for HEATHER MARIE MOSHER' form. It includes a red asterisk indicating required information, a 'Hide information about advance designation' link, and explanatory text: 'You have the option to designate someone you trust to receive and manage your benefit payments on your behalf in the event you become unable to do so yourself. SSA refers to this person as a representative payee. A representative payee is responsible for ensuring that payments are used for the beneficiary's food, shelter, medical, and personal needs. To be appointed as a representative payee, an individual must be able and willing to serve, and meet SSA selection requirements.' Below this text is a question: '\* Would the individual like to advance designate at this time?' with radio buttons for 'Yes' and 'No'. A blue 'Next' button is located at the bottom of the form area.

## 9. Financial Institutions Permission

The Financial Institutions Permission page documents whether the claimant, eligible spouse, and deemors give permission to contact Financial Institutions.

The screenshot shows the 'Financial Institutions Permission' page in the SSI Claims system. The top navigation bar includes 'Go To' with tabs for 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The page title is 'Financial Institutions Permission'. Below the title is a table with columns for 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. A left sidebar contains a 'General Identification' menu with options like 'Person Information', 'SSI Application', 'Disability', 'Multiple SSNs', 'Residency & Presence in the U.S.', 'Advance Designation', 'Financial Permission', 'Personal Information Authorization', 'Wage Authorization', 'Felony Warrant', 'Marriage (0)', and 'Holding Out (0)'. The main content area features a table titled 'Financial Institutions Permission History' with columns for 'Status', 'Permission Status', 'Collected Date (mm/dd/yyyy)', 'Ineligibility Notice Date (mm/dd/yyyy)', and 'Actions'. The table currently shows 'No records found.' Below the table are buttons for 'Add New Permission', 'Show person remarks', 'Show file documentation notes', and 'Clear Page'. At the bottom left are 'Next', 'Previous', and 'Save & Exit' buttons.

### Modal Window:

#### Add New Permission

The 'Add New Permission' modal window is displayed. It has a title bar with a close button. The main content area is titled 'Permission' and contains the following fields:

- A red asterisk indicating required information.
- A red asterisk followed by the text: **Permission to contact financial institutions**. Below this is a row of three radio buttons: 'Yes', 'No', and 'Unknown'.
- A red asterisk followed by the text: **Collected date**. Below this is a date input field with a placeholder 'mm/dd/yyyy'.

At the bottom of the modal are two buttons: 'OK' and 'Cancel'.

## 10. Personal Information Authorization

This page documents whether the claimant, eligible spouse, and members of the deeming unit give authorization for third parties to disclose their personal information to SSA.

The screenshot shows the 'Personal Information Authorization' form within the 'SSI Claims' system. The top navigation bar includes 'Go To' and several tabs: 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The main heading is 'Personal Information Authorization' with a sub-heading: 'Optional authorization allowing third parties to release non-medical, non-financial institution information to SSA'. Below this is a table with columns for 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. The 'General Identification' section is active, showing a list of options: 'Person Information' (selected), 'SSI Application', 'Disability', 'Multiple SSNs', 'Residency & Presence in the U.S.', 'Advance Designation', 'Financial Permission', 'Personal Information Authorization' (unselected), 'Wage Authorization', 'Felony Warrant', 'Marriage (0)', and 'Holding Out (0)'. The 'Personal Information Authorization' section contains a 'Person available to provide response' question with 'Yes' and 'No' radio buttons, and expandable sections for 'Show person remarks' and 'Show file documentation notes', both currently showing 'No remarks' and 'No notes' respectively. A 'Clear Page' button is located below these sections. At the bottom left, there are 'Next', 'Previous', and 'Save & Exit' buttons.

### More Info link:

### Who May Consent ✕

For more information on who may consent, see [POMS GN 03305.005 Who May Consent](#)

[Close](#)

**Modal Window:**

“Person available to provide response” is Yes

Authorization Response

\* Indicates required information

\* Relationship of person providing response  
--

\* Name of person providing response

\* First Middle \* Last Suffix

\* Authorization for disclosure of personal information to SSA  
 Yes  No

\* Date response provided  
mm/dd/yyyy

OK Cancel

**Dropdown list:**

Relationship of person providing response

--  
Self  
Parent of minor child  
Legal guardian

## 11. Wage Authorization

SSI Wage Authorization is a mini-path function in SSI Claims system. Upon accessing the page, the user is presented with a data collection screen. The SSI Wage Authorization page interfaces with the Programmatic Wage Authorization application, which houses authorization responses and presents the appropriate response collection elements and information depending on the authorization response status and claim status of both Title 16 and Title 2. This function collects and/or displays information regarding authorization for SSA to obtain wage and employment information from third party providers for the claimant, eligible spouse, ineligible spouse, eligible child, ineligible child, parent, sponsor, sponsor spouse, and sponsor cosponsor.

The SSI Wage Authorization function is automatically placed in the SSI Claims system path when required by current Policy in Initial Claims, Preeffectuation Review Contact page, and Redetermination events. It is also available to the user in other SSI Claims system events upon request. SSI Wage Authorization allows the user to review and update Programmatic Wage Authorization status without having to exit the SSI Claims system application.

The screenshot shows the SSI Wage Authorization form within the SSI Claims system. The top navigation bar includes tabs for General Identification, Living Arrangements, Resources, Income, Benefit Leads, Summary, and Claim Edits and Alerts. The main content area is titled "Wage Authorization" and features a table with columns for Name, Social Security Number (SSN), and Role (Claimant). Below this, there is a "General Identification" sidebar with various options, including "Wage Authorization" which is currently selected. The main form area is titled "Wage and Employment Information Authorization" and contains a section for "Current Authorization Details" with a "More Info" link. This section displays authorization status, response date, and attested date for both SSDI and SSI. Below this, there is a question: "Person available to provide response in person, over the phone, or through a signed paper form" with "Yes" and "No" radio button options. At the bottom of the form, there are "OK" and "Clear Page" buttons, and a footer with "Next", "Previous", and "Save & Exit" buttons.

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**General Identification**

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization**
- Felony Warrant
- Marriage (0)
- Holding Out (0)

**Wage and Employment Information Authorization**  
Optional authorization allowing payroll data providers to release wage and employment information to SSA

**Current Authorization Details** [More Info](#)

SSDI	SSDI
Authorization status	Inactive
Response date	--
Attested date	--

SSI	SSI
Authorization status	Inactive
Response date	--
Attested date	--

**Person available to provide response in person, over the phone, or through a signed paper form** [More Info](#)

Yes  No

**More Info link:**

Current Authorization Details

**Authorization Details** ✕

**Active** - Individual has given a "Yes" response

**Inactive** - This status is displayed when:

1. Individual has not provided an authorization response
2. Individual has given a "No" response
3. Individual turned 18 and a new authorization request has not been made
4. Individual revoked his or her authorization
5. Individual is no longer considered a deemor for SSI purposes
6. Claim has been denied
7. Benefits have terminated

**Authorization response date** - The date when the individual provided a "Yes" or "No" response

**Authorization terminated date** - The date when the system terminates the authorization due to the following reasons:

1. Individual turned 18 and a new authorization request has not been made
2. Individual is no longer considered a deemor for SSI purposes
3. Claim has been denied

“Person available to provide response in person, over the phone, or through a signed paper form” is Yes

SSI Claims

Go To: General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Wage Authorization

Name: \_\_\_\_\_ Social Security Number (SSN): \_\_\_\_\_ Role: Claimant

#### General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization**
- Felony Warrant
- Marriage (0)
- Holding Out (0)

#### Wage and Employment Information Authorization

Optional authorization allowing payroll data providers to release wage and employment information to SSA

**Indicates required information**

##### Current Authorization Details [More Info](#)

<b>SSDI</b>		
Authorization status	Inactive	
Response date	--	
Attested date	--	

<b>SSI</b>		
Authorization status	Inactive	
Response date	--	
Attested date	--	

**Person available to provide response in person, over the phone, or through a signed paper form** [More Info](#)

Yes  No

**Relationship of person providing response**

--

**Name of person providing response**

First  Middle  Last  Suffix

**Address of person providing response**

If you update this address, it will be used only for the purpose of printed notice and will not be saved

**Country**

United States or U.S. Territory

**Street 1**  **Street 2**  **Street 3**  **Street 4**

**City/Town**  **State/Territory**  **ZIP Code**

#### Authorization Response

**Authorization to obtain wage and employment information from payroll data providers for SSI program**

Yes  No

**SSI response date**

mm/dd/yyyy

\* Attested this response

Next Previous Save & Exit

**More Info link:**

## Who May Provide Authorization



An individual who is filing or receiving benefits may give us authorization to obtain his or her wage and employment records from any payroll data provider.

Additionally, for SSI, we will request authorization from anyone whose income and resources we consider when determining the individual's eligibility and payment amount.

Minor children, legally incompetent adults, and representative payees cannot give us authorization:

- If the individual is a minor child, then a parent or legal guardian must give us authorization on his or her behalf. The only exception is if the minor child is emancipated, then he or she can give authorization.
- If the individual is a legally incompetent adult, the legal guardian must give us authorization on behalf of the individual
- A representative payee can give authorization on behalf of the individual, only when the representative payee is the parent or legal guardian of the minor, or legal guardian of the incompetent adult

Close

### **Dropdown list:**

—
Self
Parent of minor child
Legal guardian

## 12. Felony Warrant

These pages document the claimant's or eligible spouse's status as a Fugitive Felon or Parole Probation Violator.

This DFR documents two (2) separate pages:

- Felony Warrants
- Parole or Probation Violation Warrants

As a result of the Martinez Court Settlement, SSA will only suspend on the following felony arrest warrants:

- Escape from custody – Offense Code 4901
- Flight to avoid prosecution or confinement – Offense Code 4902
- Flight – escape – Offense Code 4999

As a result of the Clark Court order, SSA can no longer make initial determination to suspend or deny payments based on a Parole or Probation violations. Historical information will be displayed, but new claims will not include PPV questions.

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### Felony Warrant

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	---------------

**General Identification**

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant**
- Marriage (0)
- Holding Out (0)

**Indicates required information**

**Accused or convicted of a felony or an attempt to commit a felony**

Yes  No  Unknown

**Show person remarks**

No remarks

**Show file documentation notes**

No notes

Clear Page

Next Previous Save & Exit

“Accused or convicted of a felony or an attempt to commit a felony” is Yes

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edit and Alerts

Felony Warrant

Name Social Security Number (SSN) Role Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

\* Indicates required information

**Review this information before you continue**

For Initial Claims, if "Yes" is displayed in any of the Felony questions, follow the Martinez Settlement guidelines in CPOMS GN 02613.860 Martinez' Court Case Settlement - Overview

For Post Entitlement, if "Yes" is displayed in any of the felony questions, do not change them to "No" unless there is an erroneous fugitive felon suspension. Changes can cause improper overpayments or underpayments.

\* Accused or convicted of a felony or an attempt to commit a felony

Yes  No  Unknown

\* State or country

State/Territory  Federal Jurisdiction or Country

\* Federal Jurisdiction or Country

United States or U.S. Territory

\* Since 04/29/2021, felony or arrest warrant [Click here first before adding a new Felony Warrant](#)

Yes  No  Unknown

Felony warrant

Do not change or delete existing warrant information unless there is an erroneous fugitive felon suspension

Status	Date Warrant Issued (mm/dd/yyyy)	Warrant Satisfied	Date Warrant Satisfied (mm/dd/yyyy)	Good Cause	Actions
No records found.					

[Add Warrant](#)

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

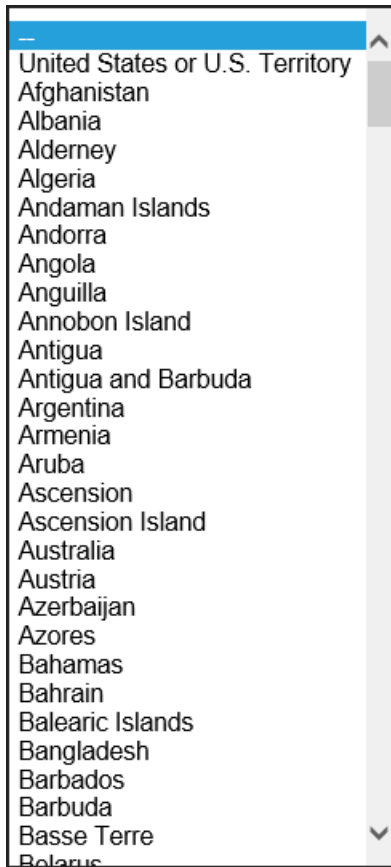
**Dropdown list:**

State or Country

State

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- Armed Forces Africa (AE)
- Armed Forces Americas (AA)
- Armed Forces Canada (AE)
- Armed Forces Europe (AE)
- Armed Forces Middle East (AE)
- Armed Forces Pacific (AP)
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine

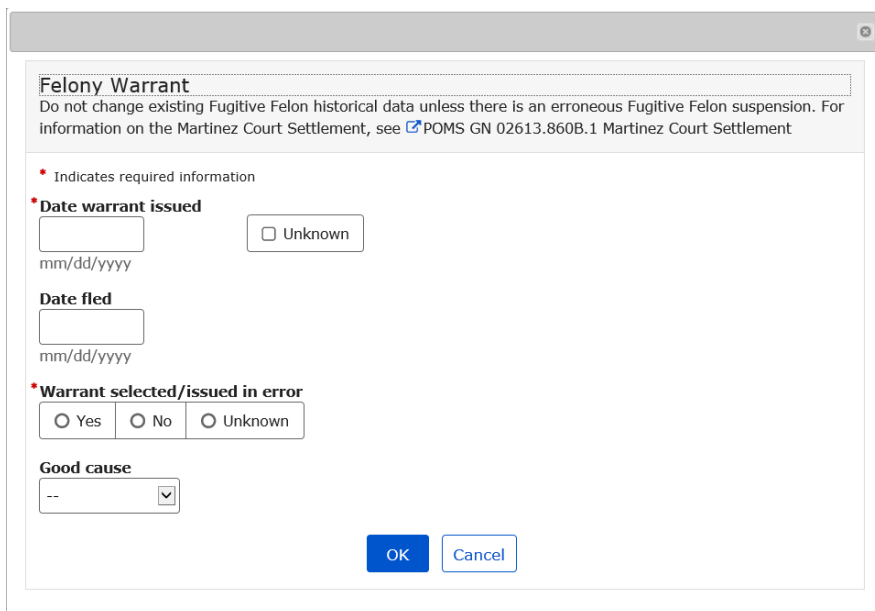
Federal Jurisdiction or Country



A dropdown menu with a blue header bar containing a minus sign. The list of items includes: United States or U.S. Territory, Afghanistan, Albania, Alderney, Algeria, Andaman Islands, Andorra, Angola, Anguilla, Annobon Island, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ascension, Ascension Island, Australia, Austria, Azerbaijan, Azores, Bahamas, Bahrain, Balearic Islands, Bangladesh, Barbados, Barbuda, Basse Terre, and Belarus. A scroll bar is visible on the right side of the list.

**Modal Window:**

Add Warrant



**Felony Warrant**  
Do not change existing Fugitive Felon historical data unless there is an erroneous Fugitive Felon suspension. For information on the Martinez Court Settlement, see [POMS GN 02613.860B.1 Martinez Court Settlement](#)

\* Indicates required information

\* **Date warrant issued**  
  Unknown  
mm/dd/yyyy

**Date fled**  
  
mm/dd/yyyy

\* **Warrant selected/issued in error**  
 Yes  No  Unknown

**Good cause**  
 --

**Dropdown list:**

Good Cause

--
Established
Not established

### 13. Child's Parents

This page documents the SSNs of parents living with a child claimant who is under age 18 prior to the effective filing date. It also documents SSNs of non-deemor parents for a claimant who alleges becoming disabled prior to age 22. It also adds a lead on the Child's Entitlement from Parents page for deemor and non deemor parents.

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

#### Child's Parents

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**General Identification**

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Payment Method
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents**
- Marriage (0)
- Holding Out (0)

**Indicates required information**

**Living with deemor parent(s) since 03/31/2021**

Yes  No

**Non Deemor parents**

**Non Deemor Parent SSN**

**Show person remarks**  
No remarks

**Show file documentation notes**  
No notes

Clear Page

Next Previous Save & Exit

1020 244

## 14. Marriage

The Marriage page captures and displays data related to marriages, which are active or terminated for all the people on the Person Claim Summary page. It establishes marital relationships and also collects the information about a separated/former spouse of the claimant. The information collected on the Marriage page is shared data among all claims where that person's SSN is active. The Marriage Information section of the Marriage page enables the user to view, and when applicable, update an individual's information. This information is collected in Person Information (PI).

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Marriage

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)**
- Holding Out (0)

Next Previous Save & Exit

Marriage Information

Social Security Number Name

Marriage Information

\*Are you or have you ever been married?

Yes  No

Marriage Details

Spouse Name	Spouse SSN	Spouse Birth Date / Age	Marriage Start Date	Marriage End Date	Reason Marriage Ended	Spouse Death Date	Action
No records found.							

Save Cancel

# Add Marriage

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Marriage

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)**
- Holding Out (0)

### Marriage Information

Social Security Number: Name

Marriage Information

Enter current or any prior marriage or Non-Marital Legal Relationship information (NMLR). [More Info](#)

**Spouse Social Security Number (SSN)** [More Info](#)

Enter SSN to obtain spouse information on record.

[Get Spouse Information On Record](#)

**Name Type**

Full Name  
 Single Name

**Spouse Name**

**First**  **Middle**  **Last**  **Suffix**

**Spouse Birth Date or Age**

Birth Date is required. If Birth date is unknown, please enter Age.

Birth Date  Age   Unknown

mm/dd/yyyy

**Marriage Date**

Unknown

mm/dd/yyyy

**Place of Marriage**

U.S. or U.S. Territory  International

City/Town  State/Territory

**Marriage Type or Non-Marital Legal Relationship Information** [More Info](#)

--

**Special Relationships** [More Info](#)

Special Relationships applies only for Title 2

--

Proof of marriage

**Marriage Ended**

Yes  
 No  
 Unknown

[Save](#) [Cancel](#)

Next Previous Save & Exit

## Dropdown list:

Suffix

—
JR
SR
I
II
III
IV
V
VI
VII
VIII
IX
X
XI
XII
XIII
XIV
XV
XVI
XVII

State/Territory

Alabama  
Alaska  
American Samoa  
Arizona  
Arkansas  
California  
Colorado  
Connecticut  
Delaware  
District of Columbia  
Federated States of Micronesia  
Florida  
Georgia  
Guam  
Hawaii  
Idaho  
Illinois  
Indiana  
Iowa  
Kansas  
Kentucky  
Louisiana  
Maine  
Marshall Islands  
Maryland  
Massachusetts  
Michigan  
Minnesota  
Mississippi

**More Info link:**

Marriage Information <span style="float: right;">✕</span>
<p>Please use the Marriage Information questions to develop all relationships that may affect benefit entitlement.</p> <p>Marriage data that is input may be matched to previous data for the SSA official record and/or alleged data from previous data inputs.</p> <p>Please adhere to Privacy and Disclosure guideline in processing and communicating this data to the Claimant or any 3rd party representation.</p> <p><a href="#">SI 00501.150</a> <a href="#">GN 01085.010</a></p>

### Social Security Number (SSN) ✕

The Spouse SSN may or may not be required depending on the type of marriage information you will provide. However, providing the Spouse SSN is recommended as this will allow you to select certain data such as Name, Birthdate, Marriage date etc., that may be on record instead of typing it in.

### Marriage Type ✕

More information about Marriage Types can be found in the following POMS links:

General Information About Determining Marital Status - [GN 00305.005](#)

Civil Union / Domestic Partnership - [GN 00210.004](#)

Common Law (non-ceremonial) Marriage - [GN 00305.075](#)

Deemed Marriage - [GN 00305.055](#)

Indian Tribal or Custom Marriage - [GN 00305.090](#)

Married by clergy or public official - [GN 00305.020](#)

### Special Relationship ✕

Special Relationships only apply to Title 2.

For Special Relationships code details, refer to the following POMS links:

[MS 00705.007](#)

[SM 03020.040](#)

### Reason Marriage Ended ✕

More information about Marriage Ended reasons can be found in the following POMS links:

Annulment, Death, Divorce - [GN 00305.120](#)

Putative - (for TII purposes only) [GN 00305.085](#)

Voided - [GN 00305.125](#)

#### **Dropdown list:**

Marriage Type or Non-Marital Legal Relationship Information

- 
- Civil Union Marriage
- Common-Law (non-ceremonial) Marriage
- Deemed Marriage
- Domestic Partnership
- Indian Tribal or Custom Marriage
- Married by clergy or public official

Special Relationships

216B1  
 216F1  
 202C2  
 216K  
 216C2/G2

Reason Marriage Ended

Annulment  
 Death  
 Divorce  
 Putative  
 Voided

SSI Marriages - Marriage Summary

SSI Claims

Go To:  General Identification  Living Arrangements  Resources  Income  Benefit Leads  Summary  Claim Edits and Alerts

Marriage

Name	Social Security Number (SSN)	Role Claimant
No records found		

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

Next Previous Save & Exit

SSI Marriages

Marriage Summary

Select marriage if couple has lived together anytime since 04/20/2021

Spouse Name	Spouse SSN	Spouse Birth Date/Age	Marriage Start Date	Marriage End Date	Spouse Deceased
No Records Found					

Show person remarks  
No remarks

Show file documentation notes  
No notes

[Show Marriage Information](#)

## 15. Holding Out

This page collects the information about the possible holding out relationship(s) of the person. It also collects the decision about a holding out relationship. The information collected on the Holding Out page is shared data among all claims where that person's SSN is active.

Develop possible holding out relationship(s) as of, or any time since xx/xx/xxxx is Yes

**Modal Window:**

## Develop Holding Out Relationship

**Holding Out Relationship**

\* Indicates required information

**\* Name**

\* First  Middle  \* Last  Suffix

**\* Does NICHOLAS COLLINS present to the community as being part of a married couple**

Yes  No  Unknown

Development needed [More Info](#)

**\* Consider as a couple for SSI**

Yes  No

**Other person's SSN**

### More Info link:

**Develop Holding Out** ✕

For more information refer to

- [POMS SI 00501.152 Determining Whether Two Individuals Are Holding Themselves Out as a Married Couple](#)
- [POMS SI 00501.150 Determining Whether a Marital Relationship Exists](#)

**Development needed** ✕

For more information refer to

- [POMS SI 00501.152 Determining Whether Two Individuals Are Holding Themselves Out as a Married Couple](#)
- [POMS SI 00501.150 Determining Whether a Marital Relationship Exists](#)

## 16. Sponsor

This page collects preliminary information about the claimant's individual sponsors and their spouses. This information is used to determine the sponsors, co-sponsor spouses, and sponsor's spouses that exist on the claimant's record.

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### Sponsor

Name	Social Security Number (SSN)	Role
		Claimant

**General Identification**

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Alien Status
- Residency & Presence in the U.S.
- Payment Method
- Financial Permission
- Personal Information Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)
- Sponsor**
- Edits and Alerts

**Indicates required information**

- Sponsor**

All at least one row is required  
When only the claimant or both members of an eligible couple are sponsored by a particular sponsor or sponsoring couple, add that sponsor to the claimant's Sponsor table.  
When only the claimant spouse is sponsored by a particular sponsor or sponsoring couple, add that sponsor to the claimant spouse's Sponsor table.

Status	Sponsor Name	Sponsor SSN	Sponsor Relationship to Claimant	Sponsor Spouse Name	Sponsor Spouse SSN	Sponsor Spouse Relationship to Claimant	Co-Sponsor	Actions
			Other			Other	No	Select Delete
			Other					Select Delete

[Add Sponsor](#)

**Show person remarks**  
No remarks

**Show file documentation notes**  
No notes

[Undo Changes](#)

[Next](#) [Previous](#) [Save & Exit](#)

### Modal Window:

#### Add Sponsor

Sponsor

\* Indicates required information

**Sponsor name**

**\* Sponsor SSN**

**\* Sponsor's relationship to this claimant**

[OK](#) [Cancel](#)

# C. Living Arrangements

## 1. Residence Address and Jurisdiction

The Residence Address and Jurisdiction page collects the claimant's physical residence address and jurisdictional address when it is different from the physical residence address. In addition, it is used to record additional residence related data to determine the claimant's federal living arrangement. It is the first living arrangement data collection page in the SSI application for deferred, full, and abbreviated claims.

SSI Claims

Go To | General Identification | **Living Arrangements** | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Residence Address and Jurisdiction

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Period Effective Dates: 05/01/2021 - Continuing

Living Arrangements

- 05/01/2021 - Continuing
- Residence Address and Jurisdiction**

**Residence Address**

\* Indicates required information

Select from favorites or type contact information

[Show favorites](#)

**Country**  
United States or U.S. Territory

Street 1 | Street 2 | Street 3 | Street 4

City/Town | State/Territory | ZIP Code

County

Unknown

**Jurisdictional residence address same as above**

Yes  No  Unknown

Override state and county code

**State and county code**

**Residence type**

<input checked="" type="radio"/> House, apartment, mobile home, houseboat
<input type="radio"/> Institution
<input type="radio"/> Non-institutional care (placed by an agency in foster care, adult foster care, or family care, and not a resident of an institution)
<input type="radio"/> Room in commercial establishment
<input type="radio"/> Room in private dwelling (separate household from landlord, either room rental only or flat fee for room and board)
<input type="radio"/> Unknown

**Lives with**

--

**Residence start date**

Unknown

mm/dd/yyyy

**Expect change in living arrangement and/or residence**

Yes  No  Unknown

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

**Dropdown list:**

Country

- United States or U.S. Territory
- Afghanistan
- Albania
- Alderney
- Algeria
- Andaman Islands
- Andorra
- Angola
- Anguilla
- Annobon Island
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ascension
- Ascension Island
- Australia
- Austria
- Azerbaijan
- Azores
- Bahamas
- Bahrain
- Balearic Islands
- Bangladesh
- Barbados
- Barbuda
- Basse Terre
- Belarus
- Belau

State/Territory

--

Alabama

Alaska

American Samoa

Arizona

Arkansas

California

Colorado

Connecticut

Delaware

District of Columbia

Federated States of Micronesia

Florida

Georgia

Guam

Hawaii

Idaho

Illinois

Indiana

Iowa

Kansas

Kentucky

Louisiana

Maine

Marshall Islands

Maryland

Massachusetts

Michigan

Minnesota

Mississippi

Lives with

--

Alone

Spouse, parents and/or children

Others

Unknown

## 2. Institution Residence

The purpose is to record residence data collected when the claimant is residing in an institution.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Institution Residence

Name	Social Security Number (SSN)	Role
		Claimant

Period Effective Dates: 09/01/2019 - Continuing

Living Arrangements

- 09/01/2019 - Continuing
- Residence Address and Jurisdiction
- Institution Residence

\* Indicates required information

Select from favorites or type contact information

[Show favorites](#)

\*Institution name

 Unknown

\*Address

\*Country

United States or U.S. Territory

\*Street 1  Street 2  Street 3  Street 4

\*City/Town  \*State/Territory  \*ZIP Code

 Unknown

Phone

U.S.  International

10-digit Number

Date institutionalization began 09/01/2019

\*Institution for Supplemental Nutrition Assistance Program (SNAP) purposes

Yes  No

Admission date 09/01/2019

\*Admission date verified

Yes  No

Discharged from the institution

\*Institution type

Public  Private  Unknown

\*Confinement reason

--

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

[Undo Changes](#)

[Next](#) [Previous](#) [Save & Exit](#)

### Confinement reason

--

Education or vocational training

Medical or psychiatric care

Public Emergency Shelter for the Homeless (PESH)

Publicly Operated Community Residence (POCR)

Prisoner

Other

Unknown

### 3. California Optional Supplement

The California Optional Supplement page collects the claimant's responses to questions required of all SSI applicants in the state of California. It also records the Claim Representative's determination of the appropriate State Supplementation code.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Loads | Summary | Claim Edits and Alerts

#### California Optional Supplement

Name	Social Security Number (SSN)	Role
		Claimant

Period Effective Dates: 09/01/2019 - Continuing

##### Living Arrangements

- 09/01/2019 - Continuing
- Residence Address and Jurisdiction
- Institution Residence
- California Optional Supplement

**\* Indicates required information**

Federal living arrangement **Not determined**

Residence state and county code

---

**\* Needs assistance in personal care, hygiene, or upkeep of residence**  
For example, help with eating, dressing, bathing, taking medication, caring for room, moving about

Yes  No  Unknown

---

**\* Has adequate cooking and food storage facilities**

Yes  No  Unknown

---

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Undo Changes](#)

[Next](#) [Previous](#) [Save & Exit](#)

## D.Resources

### 1. Resource Selection

The Resource Selection page collects and displays information about the resources owned by the claimant or deemor (claimant, claimant spouse, ineligible spouse, parent, sponsor, sponsor spouse, and co-sponsor spouse associated with the claim). This page collects the claimant's or deemor's allegation of ownership for each resource type and is used to trigger the first source of a resource type into the SSI Claim path. When a source of a particular resource type already exists in the SSI Claim path, this page displays information about the existing sources. This page provides an option for the user to add another source of an existing resource type. During preeffectuation reviews or redeterminations, the page provides a way for the user to indicate which of the existing resources will be presented as he walks the path.

Resource Selection

Name	Social Security Number (SSN)	Role
		Claimant

Resources

Resource Selection

**\* Indicates required information**

**Resources**

Since the first moment of 04/01/2021, do you own or does your name appear, either alone or with other people, on any of the following?

**\* Trusts**

Yes  No  Unknown

**\* Vehicles**

Auto, truck, camper, boat, motorcycle, etc.

Yes  No  Unknown

**\* Real Property Other than Home**

Land, houses, buildings, property in foreign countries

Yes  No  Unknown

**\* Business Equipment**

Yes  No  Unknown

**\* Achieving a Better Life Experience (ABLE) Account**

Yes  No  Unknown

**\* Financial Institution Accounts**

Checking, Savings, Credit Union, Holiday Club, Time Deposits, Individual Indian Money Account, Direct Express, etc.

Yes  No  Unknown

**\* Cash**

Yes  No  Unknown

**\* Stocks, Bonds, or Mutual Funds**

Yes  No  Unknown

**\* Promissory Note, Loan, or Property Agreement**

Yes  No  Unknown

**\* Items Held for Potential Value or Investment**

Coin or card collections, jewelry in safe deposit box, etc.

Yes  No  Unknown

**\* Life Insurance**

Yes  No  Unknown

**\* Burial Funds**

Contracts and trusts

Yes  No  Unknown

**\* Burial Spaces and Related Items**

Cemetery lots, crypts, caskets, urns, headstones, markers, etc.

Yes  No  Unknown

**\* Other Resources**

Life estates, unprobated estates, retirement funds, mineral rights, other items that can be turned into cash

Yes  No  Unknown

**Transfers**

**\* Since 04/01/2018 has John Doe or a co-owner sold, transferred title, disposed of any money or other property, including property or money in foreign countries?**

Yes  No  Unknown

Clear Page

## 2. Trust

The Trust page collects information about trusts for Supplemental Security Income (SSI) claimants and deemors. The page collects information about any trusts (excluding burial trusts) which the claimant or deemors own or whose name appears on the title. It also records assets contained within the trust and a description of those assets. The value section of the page records the combined value of the assets contained within the trust including the total loan amounts against those assets. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To ▾ General Identification Living Arrangements **Resources** Income Benefit Leads Summary Claim Edits and Alerts

### Trust

Record information about assets contained in the trust on this page and not on any other resource page.

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

#### Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**\* Indicates required information**

**\* Title of trust**  
Planned Lifetime Assistance Network of California (PLAN) Master Pooled Trust. Jane Doe Special Needs Trust etc (500 characters maximum)

   
Characters remaining: 500

**\* Funding type**  
--

**\* Revocability**  
--

**\* Established date**  
   
mm/dd/yyyy

**\* Trustee type**  
--

**\* Income from additions or earnings**  
 Yes  No  Unknown

**\* Disbursements from trust**  
 Yes  No  Unknown

Earns interest

Set aside for burial

**Values (of all resources in this Trust)**  
Alleged Value or Verified Value is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

Ninety day amendment period applies

**Assets contained in trust**

Asset Type	Details	Actions
No records found.		

Resource disposal agreement

**▼ Show person remarks**  
No remarks

**▼ Show file documentation notes**  
No notes

Next Previous Save & Exit

### Dropdown list:

Funding type

—
Self-funded
Third party funded
Unknown

Revocability

—
Irrevocable
Revocable
Unknown

Trustee type

—
Organization
Person
Unknown

### 3. Vehicle

The Vehicle page collects information about any vehicles (e.g., cars, trucks, boats, motorcycles, etc.) which the claimant or deemor's own or whose name appears on the title. It also records a description of the vehicle, the market value, the amount owed on a loan for which this vehicle is security and the use of the vehicle. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

**NOTE:** Due to a regulations change effective March 9, 2005, two USE fields (04/01/2005 OR LATER and BEFORE 04/01/2005) were added to accommodate the proper documentation of the use of the vehicle during each of those time-periods.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Vehicle

Name Social Security Number (SSN) Role Claimant

**Resources**

- Resource Selection
- Trusts
- Vehicles**
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**Indicates required information**

\*Type  
--

\*Year  
  Unknown

\*Make  
  Unknown

\*Model  
  Unknown

\*Co-Owned  
 Yes  No  Unknown

Use before 04/01/2005  
--

Use 04/01/2005 or later  
--

**Values**  
Alleged Value or Verified Value is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>

Resource disposal agreement

▼ Show person remarks  
No remarks

▼ Show file documentation notes  
No notes

**Dropdown list:**

Type

--
Auto
Boat
Camper
Motorcycle
Truck
Other
Unknown

Use before 04/01/2005

--
Employment
Essential Daily Activities
Medical Treatment
Specifically Equipped for Handicapped
Other
Unknown

Use 04/01/2005 or later

--
Transportation
Other
Unknown

## 4. Real Property

The Real Property page is used to collect the identifying information for any real property that is owned by the claimant, eligible spouse and/or deemors. In addition to the identifying information, this data group collects the value of the resource. For example: land, houses, buildings, and property in foreign countries.

SSI Claims

[Home](#)
[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

### Real Property

Name	Social Security Number (SSN)	Role Claimant																		
<div style="display: flex;"> <div style="width: 25%; border: 1px solid #ccc; padding: 5px;"> <p><b>Resources</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Resource Selection</li> <li><input checked="" type="checkbox"/> Trusts</li> <li><input checked="" type="checkbox"/> Vehicles</li> <li><input checked="" type="checkbox"/> <b>Real Property</b></li> <li><input type="checkbox"/> Business Equipment</li> <li><input type="checkbox"/> ABLE Accounts</li> <li><input type="checkbox"/> Financial Accounts</li> <li><input type="checkbox"/> Cash</li> <li><input type="checkbox"/> Stocks and Bonds</li> <li><input type="checkbox"/> Notes and Loans</li> <li><input type="checkbox"/> Value or Investment Items</li> <li><input type="checkbox"/> Life Insurance</li> <li><input type="checkbox"/> Burial Spaces</li> <li><input type="checkbox"/> Other</li> <li><input type="checkbox"/> Transfers</li> </ul> </div> <div style="width: 75%; padding: 10px;"> <p><small>* Indicates required information</small></p> <p><b>* Description</b>  <input style="width: 100%;" type="text"/></p> <p><b>* Address</b></p> <p><small>* Country</small>            United States or U.S. Territory <input type="text"/></p> <p><small>* Street 1</small> <input type="text"/> <small>Street 2</small> <input type="text"/> <small>Street 3</small> <input type="text"/> <small>Street 4</small> <input type="text"/></p> <p><small>* City/Town</small> <input type="text"/> <small>* State/Territory</small> <input type="text"/> <small>* ZIP Code</small> <input type="text"/></p> <p><input type="checkbox"/> Unknown</p> <p><b>* Used to produce income</b>  <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <p><b>* Nonbusiness property used for self-support</b>  <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <p><b>* Co-Owned</b>  <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <p><b>Values</b>  <small>Alleged Value or Verified Value is required</small></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">* Date From (mm/yyyy)</th> <th style="width: 10%;">* Date To (mm/yyyy)</th> <th style="width: 10%;">Alleged Value (\$)</th> <th style="width: 10%;">Verified Value (\$)</th> <th style="width: 10%;">Loan Amount (\$)</th> <th style="width: 10%;">Excluded Amount (\$)</th> <th style="width: 10%;">Unknown</th> <th style="width: 10%;">Countable Amount (\$)</th> <th style="width: 10%;">Actions</th> </tr> </thead> <tbody> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><a href="#">Delete</a></td> </tr> </tbody> </table> <p><input type="checkbox"/> Resource disposal agreement</p> <p><b>▼ Show person remarks</b> No remarks</p> <p><b>▼ Show file documentation notes</b> No notes</p> <p style="text-align: right;"> <a href="#">Add Another</a> <a href="#">Clear Page</a> <a href="#">Delete</a> </p> </div> </div>			* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<a href="#">Delete</a>
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions												
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<a href="#">Delete</a>												

[Next](#)
[Previous](#)
[Save & Exit](#)

**Dropdown list:**

Country – United States or U.S. Territory (Default)

United States or U.S. Territory  
Afghanistan  
Albania  
Algeria  
Andorra  
Angola  
Anguilla  
Antarctica  
Antigua  
Antigua and Barbuda  
Argentina  
Armenia  
Aruba  
Ashmore and Cartier Islands  
Australia  
Austria  
Azerbaijan  
Bahamas, the  
Bahrain  
Baker Island  
Bangladesh  
Barbados  
Bassas da India  
Basutoland  
Belarus  
Belgium  
Belize  
Benin  
Benin  
Berlin, West

State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 5. Business Equipment

The Business Equipment page is used to collect business equipment information, values and whether or not the equipment is co-owned for resources. This information is used in conjunction with other resource pages to determine the claimant's countable resources.

SSI Claims

Go To General Identification Living Arrangements **Resources** Income Benefit Leads Summary Claim Edits and Alerts

### Business Equipment

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

#### Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment**
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

\* Indicates required information

**Description**

**Co-Owned**

Yes  No  Unknown

**Values**

Alleged Value or Verified Value is required

<small>* Date From (mm/yyyy)</small>	<small>* Date To (mm/yyyy)</small>	<small>Alleged Value (\$)</small>	<small>Verified Value (\$)</small>	<small>Loan Amount (\$)</small>	<small>Excluded Amount (\$)</small>	<small>Unknown</small>	<small>Countable Amount (\$)</small>	<small>Actions</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>

Resource disposal agreement

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

## 6. Achieving a Better Life Experience (ABLE) Account

The Achieving a Better Life Experience (ABLE) Account page (hereafter referred to as the ABLE page) exists in the SSI Claims System for all claimants and deemors when an Achieving a Better Life Experience (ABLE) account has been reported to the Field Office.

Upon receipt of a state agency report, SSA's systems employ a series of rules to match and update each account received to an existing ABLE account.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Achieving a Better Life Experience (ABLE) Account

Name: Social Security Number (SSN): Role: Claimant

**Resources**

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts**
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**\* Indicates required information**

**\* Program state**  
  Unknown

**\* Account number**  
  Unknown

**\* Account opened date**  
  Unknown  
mm/dd/yyyy

**Account closed date**  
  
mm/dd/yyyy

**Signature authority name**  
 First  Middle  Last  Suffix

**Values**  
 Alleged Value or Verified Value is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<a href="#">Delete</a>

Show person remarks  
No remarks

Show file documentation notes  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) | [Previous](#) | [Save & Exit](#)

### More Info:

**Excluded Amount: More Information** ✕

The Excluded Amount is automatically calculated up to the current ABLE exclusion limit. Refer to [SI 01130.740](#)

[Close](#)

**Dropdown list:**

Program state

- 
- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada

## 7. Financial Institution Account

The Financial Institution Accounts pages exists in SSI Claims Systems, which records information about the financial institution accounts of Supplemental Security Income (SSI) claimants and deemors. The information collected includes: the type of financial institution account, the account number, the name and address of the financial institution, the value of the account for particular periods, and whether the account is co-owned, earns interest and/or is set aside for burial.

SSI Claims

[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

### Financial Institution Account

Name	Social Security Number (SSN)	Role Claimant																
<div style="display: flex; justify-content: space-between;"> <div style="width: 25%;"> <p><b>Resources</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Resource Selection</li> <li><input checked="" type="checkbox"/> Trusts</li> <li><input checked="" type="checkbox"/> Vehicles</li> <li><input checked="" type="checkbox"/> Real Property</li> <li><input checked="" type="checkbox"/> Business Equipment</li> <li><input checked="" type="checkbox"/> ABLE Accounts</li> <li><input type="checkbox"/> <b>Financial Accounts</b></li> <li><input type="checkbox"/> Cash</li> <li><input type="checkbox"/> Stocks and Bonds</li> <li><input type="checkbox"/> Notes and Loans</li> <li><input type="checkbox"/> Value or Investment Items</li> <li><input type="checkbox"/> Life Insurance</li> <li><input type="checkbox"/> Burial Spaces</li> <li><input type="checkbox"/> Other</li> <li><input type="checkbox"/> Transfers</li> </ul> </div> <div style="width: 75%;"> <p><b>Indicates required information</b></p> <p><b>Financial Institution Information</b> Use Search Financial Institutions or Select from Favorites to add or change the Financial Institution</p> <div style="border: 1px solid #ccc; padding: 5px;"> <p>Name --</p> <p>Address --</p> <p style="text-align: center;"> <input type="button" value="Search Financial Institutions"/> OR <input type="button" value="Select from Favorites"/> </p> </div> <p><b>Account Information</b></p> <p><b>Account type</b> -- <input type="button" value="v"/></p> <p><b>Account number</b> <input type="text"/></p> <p><input type="checkbox"/> Dedicated account</p> <p><input type="checkbox"/> Collective account or master sub-account <a href="#">?</a></p> <p><b>Account title</b> (500 characters maximum)</p> <div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div> <p>Characters remaining: 500</p> <p><b>Co-Owned</b>  <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown                 </p> <p><input type="checkbox"/> Earns interest</p> <p><input type="checkbox"/> Set aside for burial</p> <p><b>Values</b> Alleged Value or Verified Value is required <span style="float: right;"><a href="#">Consider Early-Deposited Benefits (EDB) Exclusion</a></span></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Date From (mm/yyyy)</th> <th>Date To (mm/yyyy)</th> <th>Alleged Value (\$)</th> <th>Verified Value (\$)</th> <th>Excluded Amount (\$)</th> <th>Unknown</th> <th>Countable Amount (\$)</th> <th>Actions</th> </tr> </thead> <tbody> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="checkbox"/></td> <td></td> <td><input type="button" value="Delete"/></td> </tr> </tbody> </table> <p><a href="#">Show person remarks</a> No remarks</p> <p><a href="#">Show file documentation notes</a> No notes</p> <p style="text-align: center;"> <input type="button" value="Add Another"/> <input type="button" value="Clear Page"/> <input type="button" value="Delete"/> </p> </div> </div>			Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>
Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions											
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>											

**Dropdown list:**

Account type

---
Checking
Credit union
Direct Express
Holiday club
Individual Indian monies
Savings
Time deposit
Other
Unknown

**Modal Window:**

Search Financial Institutions

Search Financial Institutions		
<b>Routing number</b>		
<input type="text"/>		
<b>Financial Institution Name</b> <small>?</small>		
<input type="text"/>		
<b>Street</b>		
<input type="text"/>		
<input type="text"/>		
<b>City</b>	<b>State</b>	<b>ZIP Code</b>
<input type="text"/>	-- <input type="button" value="v"/>	<input type="text"/>

<input type="button" value="Search"/>	<input type="button" value="Cancel"/>
---------------------------------------	---------------------------------------

Select from Favorites

Favorite Financial Institutions	
Total:	
<b>Financial Institution</b>	<b>Actions</b>
	<input type="button" value="Select"/> <input type="button" value="Delete"/>
	<input type="button" value="Select"/> <input type="button" value="Delete"/>

**More Info link:**

**Consider Early-Deposited Benefits (EDB) Exclusion**

Early- Deposited Benefits: More Information ✕ ^

We issue SSI payments prior to the first day of the month for which they are due a few times each year. The Treasury Department dates and issues recurring SSI payments and Federally administered supplementary payments on the last banking day of the prior month whenever the first day of the month falls on a Saturday, Sunday, or Federal holiday. These payments are called early-deposited benefits (EDB).

Early deposits before the month the payments are normally received can occur with many types of recurring income. States administering their own supplementary payments may also make their payments early, i.e., in the month before the payments are ordinarily made. Other regularly received payments, (e.g., Social Security benefits, wages, veterans benefits, pension or annuity) may sometimes be early.

Incorrect SSI eligibility determinations may result when early payments are included in the first of the month resource balance for the month the income normally would have been received. To prevent incorrect determinations, we must deduct early payment amounts from the countable resources in the month the income is normally received.

For early deposits of SSI, exclude the EDB amount when the month is an EDB month listed in [SM 01315.005](#) and applying the exclusion would

mean the difference between SSI eligibility and ineligibility (i.e., the countable amount exceeds the resource limit by an amount up to the EDB amount). Complete the Excluded amount field and select an Exclusion reason of "Early RSDI or SSI payment".

Similarly exclude early payments of other recurring income from countable resources in the months in which the payments are ordinarily received. Complete the Excluded amount field, select an Exclusion reason of "Other", complete "Other reason", explain the excluded amount, and document the evidence of early receipt in the File documentation notes.

NOTE: Be alert to situations in which multiple exclusions may apply simultaneously to the first of the month balance. Apply all applicable exclusions and document the file following the relevant policies and procedures.

[Close](#)

## 8. Cash

The Cash page exists in the SSI Claims system application to record information about cash in the possession of Supplemental Security Income (SSI) claimant or deemor. The information collected includes: periods of possession, amounts, exclusion reason(s), and if it is set aside for burial. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | **Resources** | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Cash

Document cash values as of the first moment of the month.

Name	Social Security Number (SSN)	Role
		Claimant

#### Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash**
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**Indicates required information**

Set aside for burial

**Values**

[Consider Early-Deposited Benefits \(EDB\) Exclusion](#)  
[Currency Converter](#)

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<a href="#">Delete</a>

Show person remarks  
No remarks

Show file documentation notes  
No notes

[Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

**More Info link:**

Consider Early-Deposited Benefits (EDB) Exclusion

Early- Deposited Benefits: More Information ✕ ^

We issue SSI payments prior to the first day of the month for which they are due a few times each year. The Treasury Department dates and issues recurring SSI payments and Federally administered supplementary payments on the last banking day of the prior month whenever the first day of the month falls on a Saturday, Sunday, or Federal holiday. These payments are called early-deposited benefits (EDB).

Early deposits before the month the payments are normally received can occur with many types of recurring income. States administering their own supplementary payments may also make their payments early, i.e., in the month before the payments are ordinarily made. Other regularly received payments, (e.g., Social Security benefits, wages, veterans benefits, pension or annuity) may sometimes be early.

Incorrect SSI eligibility determinations may result when early payments are included in the first of the month resource balance for the month the income normally would have been received. To prevent incorrect determinations, we must deduct early payment amounts from the countable resources in the month the income is normally received.

For early deposits of SSI, exclude the EDB amount when the month is an EDB month listed in [SM 01315.005](#) and applying the exclusion would

mean the difference between SSI eligibility and ineligibility (i.e., the countable amount exceeds the resource limit by an amount up to the EDB amount). Complete the Excluded amount field and select an Exclusion reason of "Early RSDI or SSI payment".

Similarly exclude early payments of other recurring income from countable resources in the months in which the payments are ordinarily received. Complete the Excluded amount field, select an Exclusion reason of "Other", complete "Other reason", explain the excluded amount, and document the evidence of early receipt in the File documentation notes.

NOTE: Be alert to situations in which multiple exclusions may apply simultaneously to the first of the month balance. Apply all applicable exclusions and document the file following the relevant policies and procedures.

[Close](#)

## 9. Stock, Bond, or Mutual Fund

The Stock, Bond, or Mutual Bond page collects information about a stock, bond, or mutual fund of a Supplemental Security Income (SSI) claimant or deemor. The information collected includes the type of stock, bond or mutual fund, description, the issuance date for a bond, whether it earns interest or dividends, the value for particular periods, whether it is co-owned, and/or whether the stock, bond, or mutual fund is set aside for burial. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Stock, Bond, or Mutual Fund

Use a separate page to record each item.

Name | Social Security Number (SSN) | Role  
Claimant

**Resources**

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**Resources**

\* Indicates required information

\* Type  
--

\* Description

\* Co-Owned  
 Yes  No  Unknown

Set aside for burial

**Values**  
Alleged Value or Verified Value is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
					<input type="checkbox"/>		<a href="#">Delete</a>

[Savings Bond Calculator](#)

Show person remarks  
No remarks

Show file documentation notes  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

### Dropdown list:

Type

- Mutual fund
- Stock
- U.S. Savings Bond (Series E and EE)
- U.S. Savings Bond (Series H and HH)
- U.S. Savings Bond (Series I)
- Other bond
- Unknown

## 10. Promissory Note, Loan, or Property Agreement

The Promissory Note, Loan or Property Agreement page exists in the SSI Claims System application, which allows the user to collect information about any promissory note, loan or property agreement which a claimant or deemor owns, or whose name appears on the title. It also records information about the borrower, the date and amount of the original loan, current market value, the outstanding principal balance, and the plan for repayment. This information is used in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Promissory Note, Loan, or Property Agreement

Only enter promissory note, loan or property agreement information where the individual is the lender.

Name	Social Security Number (SSN)	Role
		Claimant

**Resources**

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Funds
- Burial Spaces
- Other
- Transfers

**\* Indicates required information**

**\* Type**

**\* Original loan date**  
  **\* Original loan amount**

**\* Timetable or plan to repay**  
 Yes  No  Unknown

**\* How the borrower intends to repay**

**\* Loan bona fide for SSI purposes**  
 Yes  No  Decide later

**\* Borrower's name**

**Borrower's phone number**

**Address**  
Country:   
Street 1:  Street 2:  Street 3:  Street 4:   
City/Town:  State/Territory:  ZIP Code:

**\* Co-Owned**  
 Yes  No  Unknown

Earns interest

Set aside for burial

Resource disposal agreement

**▼ Show person remarks**  
No remarks

**▼ Show file documentation notes**  
No notes

Next | Previous | Save & Exit

### Dropdown list:

Type

Oral/informal loan  
Promissory note/commercial loan  
Property agreement  
Written/informal loan  
Unknown

Address – Country

- United States or U.S. Territory
- Afghanistan
- Albania
- Alderney
- Algeria
- Andorra
- Angola
- Anguilla
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ascension
- Australia
- Austria
- Azerbaijan
- Azores
- Bahamas
- Bahrain
- Bangladesh
- Barbados
- Barbuda
- Belarus
- Belgium
- Belize
- Benin
- Bermuda
- Bhutan
- Bolivia

## 11. Item Held for Potential Value or Investment

The Item Held for Potential Value or Investment page is used to collect items of value such as collectibles, race or breeding horses, jewelry not worn or held for family significance, etc. These items can be owned by the claimant, eligible spouse and/or deemors. This information is used in conjunction with other resource pages to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | **Resources** | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Item Held for Potential Value or Investment

Do not document items that meet our definition of household goods and personal effects.

Name	Social Security Number (SSN)	Role Claimant

#### Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**Description**

For example: collectibles, race or breeding horses, jewelry not worn or held for family significance, etc.

**Co-Owned**

Yes  No  Unknown

**Values**

Alleged Value or Verified Value is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

Resource disposal agreement

**Show person remarks**

No remarks

**Show file documentation notes**

No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

## 12. Life Insurance

The Life Insurance page exists in the SSI Claims system, which records information about the life insurance policies of Supplemental Security Income (SSI) claimants and deemors. The information collected includes: the type of policy, name of insured, face value, cash surrender value, loan amount, excluded amounts, insurance company name and address, if the policy pays dividends, whether the policy is co-owned, and/or is set aside for burial. This information is used in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To ▾ General Identification Living Arrangements **Resources** Income Benefit Leads Summary Claim Edits and Alerts

Life Insurance

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance**
- Burial Spaces
- Other
- Transfers

**Indicates required information**

**Company**  
  Unknown

**Address**  
Country  
United States or U.S. Territory ▾  
Street 1  Street 2  Street 3  Street 4   
City/Town  State/Territory  ZIP Code

**Policy number**  **Date purchased**   
mm/dd/yyyy

**Name of insured**  
-- ▾

**Face value**  
\$   Unknown

**Policy has a Cash Surrender Value (CSV)**  
 Yes  No  Unknown

Set aside for burial

**Dividend accumulations**  
 Yes  No  Unknown

Resource disposal agreement

▼ Show person remarks  
No remarks

▼ Show file documentation notes  
No notes

**Dropdown list:**

Name of insured

--
John Doe
Other
Unknown

Address - Country

United States or U.S. Territory	^
Afghanistan	
Albania	
Alderney	
Algeria	
Andorra	
Angola	
Anguilla	
Antigua	
Antigua and Barbuda	
Argentina	
Armenia	
Aruba	
Ascension	
Australia	
Austria	
Azerbaijan	
Azores	
Bahamas	
Bahrain	
Bangladesh	
Barbados	
Barbuda	
Belarus	
Belgium	
Belize	
Benin	
Bermuda	
Bhutan	
Bolivia	v

State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

### 13. Burial Fund

The Burial Fund page exists in the SSI Claims System, and allows the user to collect information about burial contracts and trusts that the claimant owns. It also records who the contract or trust is for, the date it was set aside, the original amount set aside, whether it is co-owned, revocable, irrevocable or partially irrevocable, earns interest, as well as the purchase price or market value. This information is used in conjunction with other resource pages to determine the claimant's countable resources.

SSI Claims Val - Version: 1.9.5.23, Group: 2 Robin Madison

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

**Burial Fund**

Name: GIANNA LYNN BUSH Social Security Number (SSN): 051-42-9706 Role: Claimant

**Resources**

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Funds**
- Burial Spaces
- Other
- Transfers

**Indicates required information**

\* Type: [Dropdown]

\* Description: [Text Box]

\* Name for whom held: First [Text Box] Middle [Text Box] Last [Text Box] Suffix [Text Box] [Unknown]

\* Meets exclusion relationship: For children: self or parent. For adults: self or spouse. [Yes] [No] [Decide later]

\* Date asset set aside: [mm/dd/yyyy] [Unknown]

Original amount set aside: \$ [Text Box] [Earns interest]

\* Co-Owned: [Yes] [No] [Unknown]

**Values**  
Alleged Value or Verified Value is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Revocable Amount (\$)	Verified Revocable Amount (\$)	Alleged Irrevocable Amount (\$)	Verified Irrevocable Amount (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
[Text Box]	[Text Box]	[Text Box]	[Text Box]	[Text Box]	[Text Box]	[Text Box]	[Text Box]	<input type="checkbox"/>	[Text Box]	[Delete]

Resource disposal agreement

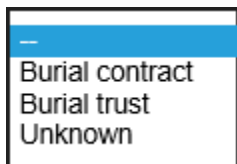
▼ Show person remarks: No remarks

▼ Show file documentation notes: No notes

[Add Another] [Clear Page] [Delete]

[New] [Previous] [Save & Exit]

**Dropdown list:**



## 14. Burial Space or Related Item

The Burial Space or Related Item page is used to collect information about the location and value of burial spaces and related items (cemetery lots, crypts, caskets, vaults, urns, and mausoleums, other repositories for burial, headstones or markers) which the claimant owns or whose name appears on the title. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Burial Space or Related Item

Name: \_\_\_\_\_ Social Security Number (SSN): \_\_\_\_\_ Role: Claimant

**Resources**

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces**
- Other
- Transfers

**Indicates required information**

**Type**

**Relationship of person for whom held**

**Name for whom held**

First:  Middle:  Last:  Suffix:   Unknown

**Co-Owned**  
 Yes  No  Unknown

**Values**  
 Alleged Value or Verified Value is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>

Resource disposal agreement

**Show person remarks**  
 No remarks

**Show file documentation notes**  
 No notes

### Dropdown list:

Type

-----

Casket

Cemetery lot

Crypt

Headstone

Marker

Urn

Other

Unknown

Relationship of person for whom held

- Self
- Spouse
- Parent
- Parent's Spouse
- Child
- Child's spouse
- Sibling
- Sibling's spouse
- Other
- Unknown

## 15. Other Resource

The Other Resource page collects information about other resources, which are not listed separately on the Resources Selection menu for a Supplemental Security Income (SSI) claimant or deemor. The information collected includes the type of resource, a description, its value for particular periods, and whether or not the resource is co-owned and/or is set aside for burial. This information is used, in conjunction with other resource screens, to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | **Resources** | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Other Resource

Name | Social Security Number (SSN) | Role  
Claimant

**Resources**

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**Indicates required information**

\* Type  
--

\* Description

\* Co-Owned  
 Yes  No  Unknown

Earns interest

**Values**  
 Alleged Value or Verified Value is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
						<input type="checkbox"/>		Delete

Resource disposal agreement

Show person remarks  
 No remarks

Show file documentation notes  
 No notes

### Dropdown list:

Type

ABLE prepaid debit card

Life estate other than residence

Life insurance dividend accumulations

Mineral rights

Prepaid debit card

Retirement/pension fund

Unprobated estate other than residence

Other

Unknown

## 16. Property / Cash Given or Sold

The Property / Cash Given or Sold page is used to collect whether the claimant or claimant's eligible spouse disposed of any resources in the 36 months prior to the effective filing month or in the post-entitlement period of review. This data group serves two purposes. The first purpose is to collect information regarding the validity of an alleged transfer of resource ownership for SSI resource determinations. The second purpose of this data group is to collect information about resources that have been given away or sold at less than fair market value for State Medicaid agency notification.

SSI Claims

Go To ▾ General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### Property / Cash Given or Sold

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Resources**

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

**Indicates required information**

**Description**

**Still own part of property**  
 Yes  No  Unknown

**Market value or amount of cash gift**  
Record the market value of the portion of the property that the individual transferred  
\$   Unknown

**Receiver's name**  
  Unknown

**Receiver's address**  
Country: United States or U.S. Territory  
Street 1:  Street 2:  Street 3:  Street 4:   
City/Town:  State/Territory:  ZIP Code:

**Receiver relationship**

**Transfer date**  
  Unknown  
mm/dd/yyyy

**Method of transfer**

**Additional considerations or proceeds expected**  
 Yes  No  Unknown

**Show person remarks**  
No remarks

**Show file documentation notes**  
No notes

### Dropdown list:

Receiver's address – Country

United States or U.S. Territory	^
Afghanistan	
Albania	
Alderney	
Algeria	
Andorra	
Angola	
Anguilla	
Antigua	
Antigua and Barbuda	
Argentina	
Armenia	
Aruba	
Ascension	
Australia	
Austria	
Azerbaijan	
Azores	
Bahamas	
Bahrain	
Bangladesh	
Barbados	
Barbuda	
Belarus	
Belgium	
Belize	
Benin	
Bermuda	
Bhutan	
Bolivia	

Receiver relationship

--
Child
Sibling
Spouse
Other
Unknown

Method of transfer

--
Exchanged for goods or services
Given away
Sold on open market
Other
Unknown

## E. Income

### 1. Income Selection

The Income Selection page collects and displays information about the type of income being received by the claimant or deemor. The Income types that are selected trigger the source of income type into the SSI Claim path. When a source of a particular income type already exists in the SSI Claim path, this page displays information about the existing sources.

This page also provides an option for the user to add another source of an existing income type.

SSI Claims

Go To General Identification Living Arrangements Resources **Income** Benefit Leads Summary Claim Edits and Alerts

**Income Selection**

Name Social Security Number (SSN) Role  
Claimant

**Income**

- Income Selection**
- Office of Child Support Enforcement Data

\* Indicates required information

**Income**  
Since the first moment of 01/01/2020, have you received, or do you expect to receive in the next 14 months, income from any of these sources?

\* **Temporary Assistance for Needy Families**  
 Yes  No  Unknown

\* **Refugee Cash Assistance**  
 Yes  No  Unknown

\* **Bureau of Indian Affairs**  
 Yes  No  Unknown

\* **Disaster Assistance**  
 Yes  No  Unknown

\* **Adoption, Foster Care, or Kinship Guardianship Assistance**  
 Yes  No  Unknown

\* **Other State, Local, or Tribal Assistance**  
Based on need and not based on need  
 Yes  No  Unknown

\* **Other Federal Income Based on Need**  
Federally funded private assistance and other Federal assistance  
 Yes  No  Unknown

\* **Alimony or Spousal Support**  
Alimony, spousal impoverishment, and other spousal support  
 Yes  No  Unknown

\* **Child Support**  
Court ordered or voluntary, parent in or outside of household, arrearages, and TANF pass-through  
 Yes  No  Unknown

\* **Wages**  
Includes earned royalties and honoraria  
 Yes  No  Unknown

\* **Self-Employment**  
All taxable years covered by the review period. Includes earned royalties and honoraria  
 Yes  No  Unknown

\* **Sick Pay (Earned)**  
Received within first full six months after stopping work and not based on employee's contribution  
 Yes  No  Unknown

\* **Sick Pay (Unearned)**  
Received within first full six months after stopping work and based on employee's contribution, or received more than first full six months after stopping work  
 Yes  No  Unknown

\* **Workers' Compensation**  
 Yes  No  Unknown

\* **Unemployment Compensation**  
 Yes  No  Unknown

\* **Social Security**  
 Yes  No  Unknown

**\*Black Lung**  
 Yes  No  Unknown

---

**\*Office of Personnel Management**  
 Yes  No  Unknown

---

**\*Railroad Board**  
 Yes  No  Unknown

---

**\*Department of Veterans Affairs**  
 Yes  No  Unknown

---

**\*Pension, Annuity, Retirement, or Disability**  
Includes disability insurance, state annuities for certain veterans, and state disability insurance  
 Yes  No  Unknown

---

**\*Interest**  
 Yes  No  Unknown

---

**\*Dividends**  
 Yes  No  Unknown

---

**\*Royalties or Honoraria (Unearned)**  
If earned, record on Wages or Self-Employment  
 Yes  No  Unknown

---

**\*Rental or Lease Income**  
Includes income from subletting and renting out a room. If received from trade or business (e.g. someone in the business of renting properties), record on Self-Employment  
 Yes  No  Unknown

---

**\*Other Income**  
Includes cash, gambling winnings, prizes, gifts, settlements, insurance proceeds, and other income or support not mentioned previously  
 Yes  No  Unknown

---

**Income Related Items**

Blind Countable Income

---

Plan to Achieve Self-Support

[Undo Changes](#)

[Next](#) [Previous](#) [Save & Exit](#)

## 2. Temporary Assistance for Needy Families

This page collects and/or displays information regarding Temporary Assistance for Needy Families being alleged or received and the amount.

SSI Claims
Go To ▾

 General Identification
  Living Arrangements
  Resources
  Income
  Benefit Loads
  Summary
  Claim Edits and Alerts

Temporary Assistance for Needy Families

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

Income Selection

Temporary Assistance for Needy Families

Office of Child Support Enforcement Data

\* Indicates required information  
Select from favorites or type source information  
[Show favorites](#)

\* Source   Unknown  ID

---

**Address**

\* Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

---

**Contact**

---

**Phone**

---

**Monthly Values**

* Date From (mm/yyyy)	* Date To (mm/yyyy)	* Family Grant Amount (\$)	* Amount Without Individual (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Verified	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>		<a href="#">Delete</a>

---

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

**Dropdown list:**

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

### 3. Refugee Cash Assistance

This page collects and/or displays information regarding the type of refugee cash assistance being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources **Income** Benefit Leads Summary Claim Edits and Alerts

Refugee Cash Assistance

Name	Social Security Number (SSN)	Role
		Claimant

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance**
- Office of Child Support Enforcement Data

**Income**

\* Indicates required information

**Type**

--

Select from favorites or type source information

[Show favorites](#)

**Source**

Unknown

**Address**

Country

United States or U.S. Territory

**Street 1**  **Street 2**  **Street 3**  **Street 4**

**City/Town**  **State/Territory** --  **ZIP Code**

Unknown

**Contact**

**Phone**

U.S.  International

10-digit Number

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

**Dropdown list:**

**Type**

- 
- Federally funded - based on need
- State, local, or tribal - based on need
- Other
- Unknown

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 4. Bureau of Indian Affairs

This page collects and/or displays information regarding the Bureau of Indian Affairs Assistance being alleged or received and the amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Loads | Summary | Claim Edits and Alerts

### Bureau of Indian Affairs Assistance

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance**
- Office of Child Support Enforcement Data

**Indicates required information**

**Type**  
--

Select from favorites or type source information  
[Show favorites](#)

**Source**   Unknown **ID**

**Address**

**Street 1**  **Street 2**  **Street 3**  **Street 4**

**City/Town**  **State/Territory** --  **ZIP Code**

Unknown

**Contact**

**Phone**

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

**Dropdown list:**

**Type**

- 
- Adult custodial care - non-institutional
- Child welfare assistance - non-institutional
- General assistance
- Unknown

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 5. Disaster Assistance

This page collects and/or displays information regarding the type of Disaster Assistance being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### Disaster Assistance

Name	Social Security Number (SSN)	Role
		Claimant

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance**
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

**Disaster Assistance Details**

\* Indicates required information

**Type**  
--

Select from favorites or type source information  
[Show favorites](#)

**Source**   Unknown **ID**

**Address**

Country  
United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory -- ZIP Code

Unknown

**Contact**

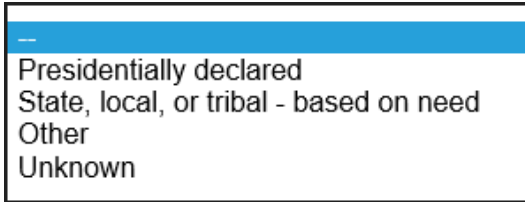
**Phone**  
 U.S.  International  
10-digit Number

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

**Dropdown list:**

**Type**



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing the following options: "Presidentially declared", "State, local, or tribal - based on need", "Other", and "Unknown".

**State/Territory**



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a scrollable list of U.S. states and territories. The visible options are: Alabama, Alaska, American Samoa, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Marshall Islands, Maryland, Massachusetts, Michigan, Minnesota, and Mississippi. The list is partially obscured at the bottom.

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

## 6. Adoption, Foster Care, or Kinship Guardianship Assistance

This page collects and/or displays information regarding adoption, foster care, or kinship guardianship assistance being alleged or received, and the amount.

SSI Claims
Go To

● General Identification
 ● Living Arrangements
 ● Resources
 ○ Income
 ● Benefit Leads
 ○ Summary
 ○ Claim Edits and Alerts

Adoption, Foster Care, or Kinship Guardianship Assistance

Name	Social Security Number (SSN)	Role Claimant

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance**
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Income and funding type**

--

Select from favorites or type source information

[▼ Show favorites](#)

**Source**   Unknown **ID**

---

**Address**

Country

**Street 1**  **Street 2**  **Street 3**  **Street 4**

**City/Town**  **State/Territory**  **ZIP Code**

Unknown

---

**Contact**

---

**Phone**

U.S.  International

10-digit Number

---

[▼ Show person remarks](#)

No remarks

[▼ Show file documentation notes](#)

No notes

Next
Previous
Save & Exit

**Dropdown list:**

**Income and funding type**

- 
- Adoption assistance: Other
- Adoption assistance: State, local, or tribal - based on need
- Adoption assistance: Title IV-B or title XX
- Adoption assistance: Title IV-E - based on need
- Adoption assistance: Title IV-E - not based on need
- Adoption assistance: Unknown
- Foster care payment: Other
- Foster care payment: Section 477 of title IV-E - independent living initiatives
- Foster care payment: State, local, or tribal - based on need
- Foster care payment: Title IV-B or title XX
- Foster care payment: Title IV-E - based on need
- Foster care payment: Unknown
- Kinship guardianship assistance: Title IV-E - based on need
- Kinship guardianship assistance: Title IV-E - not based on need
- Kinship guardianship assistance: Unknown
- Unknown

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Berlin, West

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 7. Other State, Local, or Tribal Assistance

This page collects and/or displays information regarding the type of other state, local, or tribal assistance being alleged or received and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Loads
Summary
Claim Edits and Alerts

Other State, Local, or Tribal Assistance

Name	Social Security Number (SSN)	Role Claimant

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance**
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

Select from favorites or type source information

[Show favorites](#)

**Source**   Unknown ID

---

**Description**

**Type**

**Address**

\* Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

**Contact**

**Phone**

**Monthly Values**

Alleged Amount or Verified Amount is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

[Add Another](#) [Clear Page](#) [Delete](#)

Next
Previous
Save & Exit

**Dropdown list:**

**Type**

—
Federally funded private - based on need
Other Federal assistance - based on need
Unknown

**State/Territory**

—	^
Alabama	
Alaska	
American Samoa	
Arizona	
Arkansas	
California	
Colorado	
Connecticut	
Delaware	
District of Columbia	
Federated States of Micronesia	
Florida	
Georgia	
Guam	
Hawaii	
Idaho	
Illinois	
Indiana	
Iowa	
Kansas	
Kentucky	
Louisiana	
Maine	
Marshall Islands	
Maryland	
Massachusetts	
Michigan	
Minnesota	
Mississippi	v

## 8. Other Federal Income Based on Need

This page collects and/or displays information regarding the type of Federal Income based on need being alleged or received, and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Loads
Summary
Claim Edits and Alerts

Other Federal Income Based On Need

<b>Name</b>	<b>Social Security Number (SSN)</b>	<b>Role</b> Claimant
-------------	-------------------------------------	-------------------------

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need**
- Alimony and Spousal Support
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Type**

--

Select from favorites or type source information

[Show favorites](#)

**Source**

Unknown  **ID**

**Address**

\* Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

**Contact**

**Phone**

**Monthly Values**

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input type="checkbox"/>	<input style="width: 50px;" type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

Next
Previous
Save & Exit

**Dropdown list:**

**Type**

--
Federally funded private - based on need
Other Federal assistance - based on need
Unknown

**State/Territory**

--	^
Alabama	
Alaska	
American Samoa	
Arizona	
Arkansas	
California	
Colorado	
Connecticut	
Delaware	
District of Columbia	
Federated States of Micronesia	
Florida	
Georgia	
Guam	
Hawaii	
Idaho	
Illinois	
Indiana	
Iowa	
Kansas	
Kentucky	
Louisiana	
Maine	
Marshall Islands	
Maryland	
Massachusetts	
Michigan	
Minnesota	
Mississippi	v

## 9. Alimony and Spousal Support

This page collects and or displays information regarding Alimony or Spousal Support being alleged or received and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

### Alimony or Spousal Support

<b>Name</b>	<b>Social Security Number (SSN)</b>	<b>Role</b> Claimant
-------------	-------------------------------------	-------------------------

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support**
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Type**

--

Select from favorites or type source information  
[Show favorites](#)

**Source**

Unknown  **ID**

**Address**

Country  
United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

**Contact**

**Phone**

U.S.  International

10-digit Number

**Monthly Values**  
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

Next
Previous
Save & Exit

**Dropdown list:**

## Type

—
Court ordered alimony or support
Spousal impoverishment
Voluntary alimony or support
Unknown

## Country – United States or U.S. Territory (Default)

United States or U.S. Territory	^
Afghanistan	
Albania	
Algeria	
Andorra	
Angola	
Anguilla	
Antarctica	
Antigua	
Antigua and Barbuda	
Argentina	
Armenia	
Aruba	
Ashmore and Cartier Islands	
Australia	
Austria	
Azerbaijan	
Bahamas, the	
Bahrain	
Baker Island	
Bangladesh	
Barbados	
Bassas da India	
Basutoland	
Belarus	
Belgium	
Belize	
Benin	
Benin	
Benin, West	v

## State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 10. Child Support

This page collects and/or displays information regarding Child Support being alleged or received and the amount of income being garnished for Child Support for the period.

SSI Claims
Go To

 General Identification
  Living Arrangements
  Resources
  Income
  Benefit Leads
  Summary
  Claim Edits and Alerts

### Child Support

Name	Social Security Number (SSN)	Role Claimant

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support**
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Type**

--

Select from favorites or type source information  
[Show favorites](#)

**Source**

Unknown

**Address**

Country

United States or U.S. Territory

\* Street 1      Street 2      Street 3      Street 4

City/Town      State/Territory      ZIP Code

Unknown

**Contact**

**Phone**

U.S.     International

10-digit Number

**Monthly Values**

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

Add Another
Clear Page
Delete

Next
Previous
Save & Exit

**Dropdown list:**

## Type

—
Arrearages for adult retained by parent or other person
Court ordered - absent parent
Court ordered - parent in household
TANF pass-through
Voluntary - absent parent
Unknown

## Country – United States or U.S. Territory (Default)

United States or U.S. Territory	▲
Afghanistan	
Albania	
Algeria	
Andorra	
Angola	
Anguilla	
Antarctica	
Antigua	
Antigua and Barbuda	
Argentina	
Armenia	
Aruba	
Ashmore and Cartier Islands	
Australia	
Austria	
Azerbaijan	
Bahamas, the	
Bahrain	
Baker Island	
Bangladesh	
Barbados	
Bassas da India	
Basutoland	
Belarus	
Belgium	
Belize	
Benin	
Benin	
Berlin, West	▼

## State/Territory

Alabama  
Alaska  
American Samoa  
Arizona  
Arkansas  
California  
Colorado  
Connecticut  
Delaware  
District of Columbia  
Federated States of Micronesia  
Florida  
Georgia  
Guam  
Hawaii  
Idaho  
Illinois  
Indiana  
Iowa  
Kansas  
Kentucky  
Louisiana  
Maine  
Marshall Islands  
Maryland  
Massachusetts  
Michigan  
Minnesota  
Mississippi

## 11. Wages

This page collects and/or displays information regarding the verification of wages the person receives, the date the person receives the wages, and the amount of the wages along with any deductions. This page is updated by the user and other external applications (e.g. SSI Telephone Wage Reporting and SSI Monthly Wage Verification).

SSI Claims

[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

### Wages

Name	Social Security Number (SSN)	Role Claimant
No results found.		

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages**
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

**Income**

\* Indicates required information  
Select from favorites or type employer information  
[Show favorites](#)

\* Employer name   Unknown  EIN

---

**Address**

Country

\* Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

---

**Contact**

---

**Phone**

U.S.  International

10-digit Number

---

**Monthly Values**  
Alleged Amount, Reported Amount or Verified Amount is required [More Info](#)

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Amount (\$)	Reported Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

---

[Show person remarks](#)  
No remarks

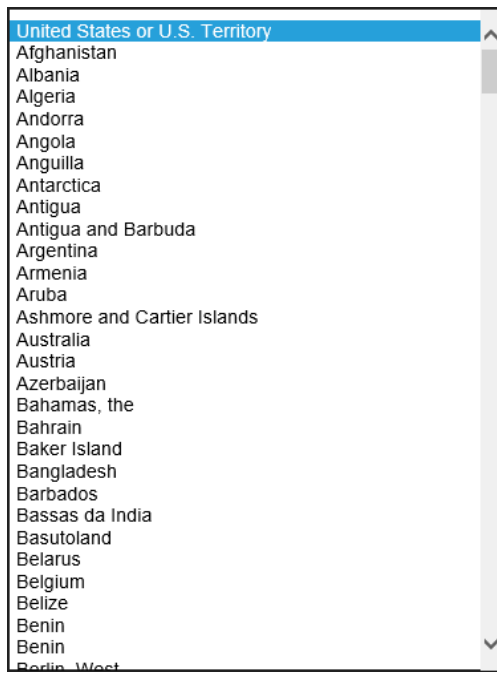
[Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

### Dropdown list:

## Country – United States or U.S. Territory (Default)



A scrollable list of countries and territories. The list is enclosed in a rectangular box with a vertical scrollbar on the right side. The top item, 'United States or U.S. Territory', is highlighted in blue. The list includes the following items:

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

## State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 12. Quarterly Wages Summary

This page displays information about wages in a quarterly format.

The employee compares this wage information with information on the alert produced by the State Wage Record Match. The alert is disposed of or developed based on the result of the employee comparison.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Quarterly Wages Summary

Name Social Security Number (SSN) Role  
Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Office of Child Support Enforcement Data

Quarterly Wages Summary

Year 2021 [Expand all](#)

Expand	Quarter	Employers	Quarterly Countable Amount (\$)	Quarterly Deduction Amount (\$)	Quarterly Gross Wages Amount (\$)
<input checked="" type="checkbox"/>	First	1 Employer No employer(s) present No employer(s) present No employer(s) present	1,500.00	0.00	1,500.00

Year 2020  
No wages are present.

Year 2019  
No wages are present.

[Next](#) [Previous](#) [Save & Exit](#)

# 13. Self-Employment Income

This page collects and/or displays information regarding self-employment income.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

### Self-Employment Income

Name
Social Security Number (SSN)
Role  
Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Office of Child Support Enforcement Data

\* Indicates required information

**\* Business name**   Unknown EIN

---

**Address**

Country

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

---

**Yearly Values**  
Alleged Amount or Verified Amount is required

* IRS Tax Year Type	* Tax Year From Date (mm/yyyy)	* Tax Year To Date (mm/yyyy)	Short Tax Year Reason	* Gross Income Amount (\$)	* Profit or Loss	Alleged (Profit or Loss) Net Amount (\$)	Verified (Profit or Loss) Net Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Monthly Countable (Profit or Loss) Amount (\$)	Actions
-					-					<input type="checkbox"/>		<input type="button" value="Delete"/>

**\* Self-employment is continuing or is expected to continue**

Yes  No  Unknown

▼ Show person remarks  
No remarks

▼ Show file documentation notes  
No notes

**Dropdown list:**

**Country – United States or U.S. Territory (Default)**

United States or U.S. Territory  
Afghanistan  
Albania  
Algeria  
Andorra  
Angola  
Anguilla  
Antarctica  
Antigua  
Antigua and Barbuda  
Argentina  
Armenia  
Aruba  
Ashmore and Cartier Islands  
Australia  
Austria  
Azerbaijan  
Bahamas, the  
Bahrain  
Baker Island  
Bangladesh  
Barbados  
Bassas da India  
Basutoland  
Belarus  
Belgium  
Belize  
Benin  
Benin  
Berlin, West

### State/Territory

—

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

### IRS Tax Year Type

—

- Calendar
- Fiscal
- Short

### Profit or Loss

—

- Loss
- Profit

## 14. Substantial Gainful Activity

The Substantial Gainful Activity (SGA) page collects information regarding the Claim Specialist's determination of the claimant's involvement in SGA.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

### Substantial Gainful Activity (SGA)

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity**
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Blind Countable Income
- Plan to Achieve Self-Support
- Office of Child Support Enforcement Data

\* Indicates required information

**\* Is SGA involved?**

Yes  No  Unknown

▼ Show person remarks  
No remarks

▼ Show file documentation notes  
No notes

Undo Changes

Next Previous Save & Exit

## 15. Work Expenses

This page collects and/or displays information regarding work expenses incurred by claimants that have alleged disability or blindness on the Disability page. The system places this page in the path when an individual has alleged disability or blindness or low vision, and has reported Wages or Self-Employment income.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

### Work Expenses

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses**
- Office of Child Support Enforcement Data

**Impairment Related Work Expenses**

**\* Indicates required information**

**\* Select from the following options**

Select all the expenses that apply and provide appropriate details

- Attendant care services
- Drugs and medical services essential to work
- Durable medical devices
- Expendable medical supplies
- Impairment related equipment or services - Other
- Non-medical appliances and equipment
- Physical therapy
- Prosthesis
- Residential modifications - necessary to work
- Service animal
- Training on use of impairment related equipment - necessary for work
- Transportation costs
- Vehicle modification
- Other

There are no expenses to record

Unknown

**▼ Show person remarks**  
No remarks

**▼ Show file documentation notes**  
No notes

Undo Changes

Next | Previous | Save & Exit

## 16. Work Expenses Summary

The Work Expenses Summary page displays information regarding blind or impairment related work expenses reported on the claim. Reported expenses are grouped by period. A period is a month or series of months with the same expenses in the same amounts. Periods are first displayed in collapsed format, and can be expanded to present each expense and the associated monthly expense amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

### Work Expenses Summary

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	---------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary**
- Office of Child Support Enforcement Data

#### Impairment Related Work Expenses

[Expand all](#)

Expand	Period	Expense Type	Monthly Countable Total (\$)
<a href="#">+</a>	01/2021 - 03/2021		25.00

Next Previous Save & Exit

## 17. Sick Pay (Earned)

This page collects and/or displays information regarding earned sick pay being alleged or received and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

### Sick Pay (Earned)

**Name** \_\_\_\_\_ **Social Security Number (SSN)** \_\_\_\_\_ **Role** Claimant

**Income**

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses

**Sick Pay (Earned)**

- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

Select from favorites or type source information  
[Show favorites](#)

**Source**   Unknown **EIN**

---

**Address**

Country

**Street 1**  **Street 2**  **Street 3**  **Street 4**

**City/Town**  **State/Territory**  **ZIP Code**

Unknown

---

**Contact**

---

**Phone**

U.S.  International

10-digit Number

---

**Monthly Values**

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

---

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

**Dropdown list:**

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

## State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 18. Sick Pay (Unearned)

This page collects and/or displays information regarding unearned sick pay being alleged or received and the amount.

SSI Claims
Go To

● General Identification
 ● Living Arrangements
 ● Resources
 ○ Income
 ● Benefit Leads
 ○ Summary
 ○ Claim Edits and Alerts

### Sick Pay (Unearned)

Name	Social Security Number (SSN)	Role Claimant

#### Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

Select from favorites or type source information  
[▼ Show favorites](#)

**Source**   Unknown

---

**Address**

Country

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

---

**Contact**

---

**Phone**

U.S.  International

10-digit Number

---

**Monthly Values**  
Alleged Amount or Verified Amount is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

---

[▼ Show person remarks](#)  
No remarks

[▼ Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

**Dropdown list:**

**Country – United States or U.S. Territory (Default)**

United States or U.S. Territory  
Afghanistan  
Albania  
Algeria  
Andorra  
Angola  
Anguilla  
Antarctica  
Antigua  
Antigua and Barbuda  
Argentina  
Armenia  
Aruba  
Ashmore and Cartier Islands  
Australia  
Austria  
Azerbaijan  
Bahamas, the  
Bahrain  
Baker Island  
Bangladesh  
Barbados  
Bassas da India  
Basutoland  
Belarus  
Belgium  
Belize  
Benin  
Benin West

## State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 19. Workers' Compensation

This page collects and displays information about Workers' Compensation benefits being alleged or received.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Workers' Compensation

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Workers' Compensation**
- Unemployment Compensation
- Blind Countable Income
- Plan to Achieve Self-Support
- Office of Child Support Enforcement Data

\* Indicates required information

**Type**

--

Select from favorites or type source information  
[Show favorites](#)

**Source**

Unknown  ID

---

**Address**

Country  
United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

---

**Contact**

---

**Phone**

U.S.  International

10-digit Number

---

**Monthly Values**  
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

---

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

### Dropdown list:

#### Type

--

Employer or insurance company

Federal

State

Unknown

#### State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

**Country – United States or U.S. Territory (Default)**

United States or U.S. Territory  
Afghanistan  
Albania  
Algeria  
Andorra  
Angola  
Anguilla  
Antarctica  
Antigua  
Antigua and Barbuda  
Argentina  
Armenia  
Aruba  
Ashmore and Cartier Islands  
Australia  
Austria  
Azerbaijan  
Bahamas, the  
Bahrain  
Baker Island  
Bangladesh  
Barbados  
Bassas da India  
Basutoland  
Belarus  
Belgium  
Belize  
Benin  
Benin  
Berlin, West

## 20. Unemployment Compensation

This page collects and/or displays information regarding the type of unemployment being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Unemployment Compensation

Name Social Security Number (SSN) Role  
Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Office of Child Support Enforcement Data

**Source**

Unknown  ID

**Address**

Country  
United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

**Contact**

**Phone**

U.S.  International

10-digit Number

**Monthly Values**

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

### Dropdown list:

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 21. Social Security Benefits

This page collects and/or displays information regarding the type of Social Security being alleged or received and the amount. It is updated by the user, iClaim and the Master Beneficiary Record (MBR) interface with SSI systems.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

### Social Security Benefit

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Social Security Benefits**
- Black Lung Benefits
- Office of Personnel Management Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

**Indicates required information**

**ID**

**Pending Claim**

Yes  No

**Show person remarks**

No remarks

**Show file documentation notes**

No notes

## 22. Black Lung Benefits

This page collects and/or displays information regarding the type of Black Lung Benefit being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Black Lung Benefit

Name Social Security Number (SSN) Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

\* Type

\* ID   Unknown

Monthly Values  
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

Show person remarks  
No remarks

Show file documentation notes  
No notes

### Dropdown list:

#### Type

<input type="text" value="--"/> Part B Part C Unknown
----------------------------------------------------------------

## 23. Office of Personnel Management Benefits

This page collects and/or displays information regarding Office of Personnel Management Benefit being alleged or received and the amount. OPM makes U.S. Civil Service and Federal Employee Retirement System (FERS) payments for disability, retirement, or death. When this information is updated to the SSR via the OPM interface, the system will also update the data on the Centrally Stored Information (CSI). Open a standalone post entitlement (PE) event via MSSICS to send the updated data to the SSR. Cost of living allocations (COLAs) are only updated for those individuals on the SSR.

SSI Claims

[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Office of Personnel Management Benefit

Name	Social Security Number (SSN)	Role Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

\* ID  [Get ID](#)  Unknown

**Monthly Values**  
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Add Another](#)
[Clear Page](#)
[Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

### Modal Window:

**Get ID**

Get Office of Personnel Management (OPM) ID

▪ Indicates required information

Enter the Civil Service Claim Number (CSCN) from the Civil Service Award letter, including any prefix or suffix. For more information, refer to [SM 02002.210](#)

▪ **Civil Service Claim Number (CSCN)**

## 24. Railroad Board Benefits

This page collects and/or displays information regarding the type of Railroad Board Benefit being alleged or received, and the amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

### Railroad Board Benefits

Name: \_\_\_\_\_ Social Security Number (SSN): \_\_\_\_\_ Role: Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits**
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Type**

**ID**  
   Unknown

**Monthly Values**  
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

### Dropdown list:

Type

---

Annuity

Sickness

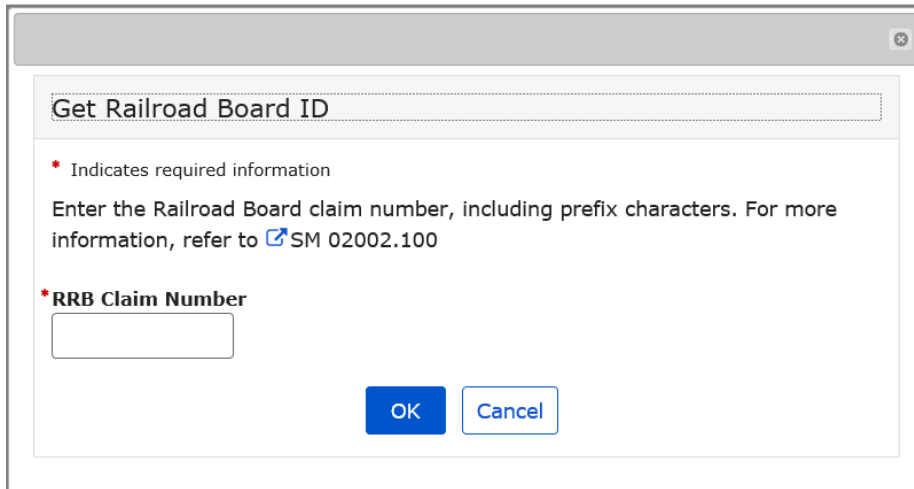
Strike benefits

Unemployment

Unknown

**Modal Window:**

**Get ID**



The image shows a modal window with a title bar containing the text "Get Railroad Board ID" and a close button. Below the title bar, there is a text area with the following content:

\* Indicates required information

Enter the Railroad Board claim number, including prefix characters. For more information, refer to [SM 02002.100](#)

\*RRB Claim Number

Below the text area, there is a text input field. At the bottom of the modal, there are two buttons: "OK" and "Cancel".

## 25. Veterans Affairs Payments

This page collects and/or displays information regarding the type of Veterans Affairs Payments income being alleged or received, and the amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

Veterans Affairs Payment

Name | Social Security Number (SSN) | Role Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments**
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

\* Type [More Info](#)

--

\* Name of Beneficiary

\* First M.I. \* Last

Unknown

\* ID

Get ID Unknown

▼ Show person remarks

No remarks

▼ Show file documentation notes

No notes

Add Another Clear Page Delete

Next Previous Save & Exit

### Dropdown list:

#### Type

—

- Compensation - not based on need
- Disability insurance payment - rider
- Educational benefits
- Life insurance payment
- Other VA payment - based on need
- Other VA payment - not based on need
- Parents' dependency and indemnity compensation
- Pension - based on need
- Pension - Medal of Honor
- Pension - special act of Congress
- VA caregivers payment
- Unknown

## **Modal Window:**

### **Get ID**

SM 02002.010'. There are three required fields: 1. '\*VA claim number' with a text input field. 2. '\*VA payee' with a dropdown menu showing '--'. 3. '\*VA beneficiary receiving portion of augmented benefits' with a dropdown menu showing '--'. At the bottom are 'OK' and 'Cancel' buttons."/>

**Get VA ID Information**

\* Indicates required information

Please provide the following information for system to automatically construct the VA ID information. For more information refer to [SM 02002.010](#)

\*VA claim number

\*VA payee

\*VA beneficiary receiving portion of augmented benefits

OK Cancel

## **Get ID Dropdown list:**

### **VA Payee**

--

00 - Veteran

10 - Spouse, Widow(er)

11 Child (Direct Payment)

12 Child (Direct Payment)

13 Child (Direct Payment)

14 Child (Direct Payment)

15 Child (Direct Payment)

16 Child (Direct Payment)

17 Child (Direct Payment)

18 Child (Direct Payment)

19 Child (Direct Payment)

50 - Father

60 - Mother

70 - Widow(er), child, parent (death service award)

71 - Widow(er), child, parent (death service award)

72 - Widow(er), child, parent (death service award)

73 - Widow(er), child, parent (death service award)

74 - Widow(er), child, parent (death service award)

75 - Widow(er), child, parent (death service award)

76 - Widow(er), child, parent (death service award)

77 - Widow(er), child, parent (death service award)

78 - Widow(er), child, parent (death service award)

99 - Veteran (Institutional award)

### **VA beneficiary receiving portion of augmented benefits**

--

Dependent (Spouse or child) receiving dependent's portion

Other

Veteran or Widow(er) receiving primary portion

## 26. Pensions, Annuities, Retirement, and Disability Payments

This page collects and/or displays information regarding the type of pension, annuity, retirement, disability payment, or similar income being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Pension, Annuity, Retirement, or Disability Payment

Name	Social Security Number (SSN)	Role
		Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

**Type**

\* Indicates required information

Type:

Select from favorites or type source information

[Show favorites](#)

**Source**

Unknown **ID**    Unknown

**Address**

Country:

**Street**

Street 1:  Street 2:  Street 3:  Street 4:

City/Town:  State/Territory:  ZIP Code:

Unknown

**Contact**

**Phone**

U.S.  International

10-digit Number:

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

### Dropdown list:

Type

- 
- Annuity
- Disability insurance
- Federal - non-OPM
- Foreign government
- Foreign private
- Private disability
- Private retirement
- State annuity for certain veterans
- State disability insurance benefits
- U.S. local government
- U.S. military
- U.S. state government
- Union disability
- Union retirement
- Other
- Unknown

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Berlin, West

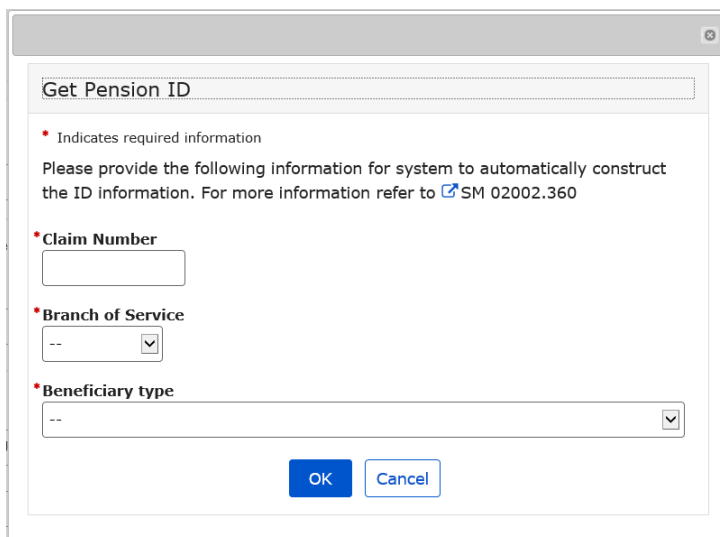
## State/Territory



A scrollable list of US states and territories. The list is currently showing the following items from top to bottom: Alabama, Alaska, American Samoa, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Marshall Islands, Maryland, Massachusetts, Michigan, Minnesota, and Mississippi. The list is enclosed in a rectangular box with a vertical scrollbar on the right side.

## Modal Window:

### Get ID



A modal window titled "Get Pension ID" with a close button in the top right corner. The window contains the following text and fields:

- A red asterisk icon followed by the text: "Indicates required information"
- Text: "Please provide the following information for system to automatically construct the ID information. For more information refer to [SM 02002.360](#)"
- A red asterisk icon followed by the label "Claim Number" and an empty text input field.
- A red asterisk icon followed by the label "Branch of Service" and a dropdown menu with "--" selected.
- A red asterisk icon followed by the label "Beneficiary type" and a dropdown menu with "--" selected.
- At the bottom, there are two buttons: "OK" (blue) and "Cancel" (white with blue border).

**Get ID – Dropdown list:**

**Branch of Service**

--
Air Force
Army
Coast Guard
Marines
Navy

**Beneficiary Type**

--
Alottee
Retired Serviceman's Family Protection Plan with eligibility date 09/01/1974 or later
Retired Serviceman's Family Protection Plan with eligibility date before 09/01/1974
Retiree
Survivor Benefit Plan type 1, 2, 3, 4, or 5
Survivor Benefit Plan type 6

## 27. Interest

This page collects and/or displays information regarding the type of interest being alleged or received and the amount.

SSI Claims
Go To

● General Identification
 ● Living Arrangements
 ● Resources
 ○ Income
 ● Benefit Leads
 ○ Summary
 ○ Claim Edits and Alerts

### Interest

Name	Social Security Number (SSN)	Role Claimant

#### Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- **Interest**
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Type**

Select from favorites or type source information  
▼ Show favorites

**Source**  
  Unknown ID

**Address**  
 Country

\* Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

**Contact**

**Phone**  
 U.S.  International  
 10-digit Number

Excluded

**Monthly Values**  
 Alleged Amount or Verified Amount is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

▼ Show person remarks  
No remarks

▼ Show file documentation notes  
No notes

**Dropdown list:**

**Type**

- 
- Bonds - other
- Bonds - U.S. savings
- Burial funds
- Checking
- Credit union
- Holiday club
- Individual Indian Money account
- Life insurance
- Mutual fund
- Promissory notes or loans
- Savings
- Stock
- Time deposits
- Trust
- Other
- Unknown

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 28. Dividends

This page collects and/or displays information regarding the type of Dividend being alleged or received and the amount.

SSI Claims
Go To

 General Identification
  Living Arrangements
  Resources
  Income
  Benefit Leads
  Summary
  Claim Edits and Alerts

### Dividend

<b>Name</b>	<b>Social Security Number (SSN)</b>	<b>Role</b> Claimant
-------------	-------------------------------------	-------------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, retirement, and Disability Payments
- Interest
- Dividends**
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Type**  
--

Select from favorites or type source information  
[Show favorites](#)

**Source**   Unknown **ID**

**Address**  
Country  
United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory --  ZIP Code

Unknown

**Contact**

**Phone**  
 U.S.  International  
10-digit Number

Excluded

**Monthly Values**  
Alleged Amount or Verified Amount is required

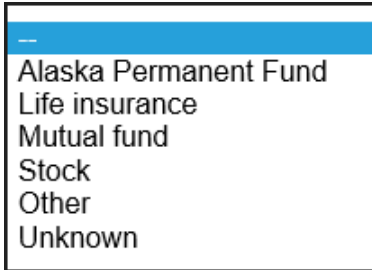
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

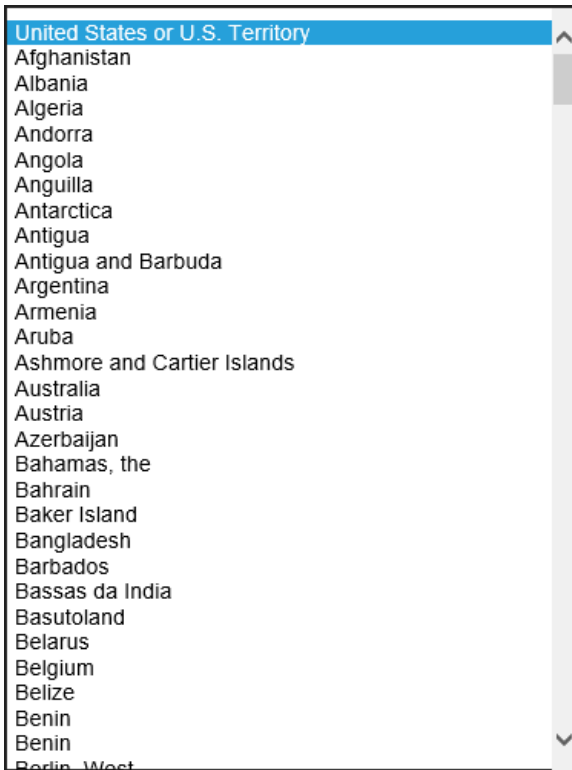
**Dropdown list:**

**Type**



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of options: Alaska Permanent Fund, Life insurance, Mutual fund, Stock, Other, and Unknown.

**Country – United States or U.S. Territory (Default)**



A dropdown menu with a blue header bar containing the text "United States or U.S. Territory". The menu is open, showing a scrollable list of countries and territories. The visible items are: Afghanistan, Albania, Algeria, Andorra, Angola, Anguilla, Antarctica, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ashmore and Cartier Islands, Australia, Austria, Azerbaijan, Bahamas, the, Bahrain, Baker Island, Bangladesh, Barbados, Bassas da India, Basutoland, Belarus, Belgium, Belize, Benin, and Benin, West.

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 29. Royalties and Honoraria (Unearned)

This page collects and/or displays information about the type of royalties and/or honorarium (unearned) being alleged or received and the amount. It is counted as unearned income. If the royalties or honoraria (unearned) are determined to be earned, then enter as wages on the Wages page.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Royalties or Honorarium (Unearned)

Name	Social Security Number (SSN)	Role Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

Select from favorites or type source information

[Show favorites](#)

\* Source   Unknown ID

---

**Address**

Country

\* Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

---

**Contact**

---

**Phone**

U.S.  International

10-digit Number

---

**Monthly Values**

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

---

[Show person remarks](#)

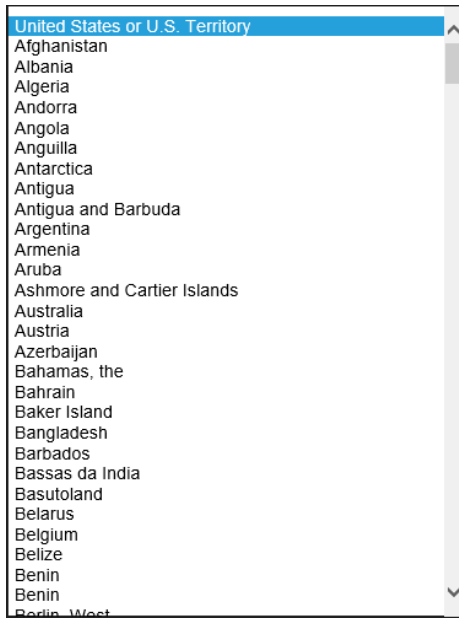
No remarks

[Show file documentation notes](#)

No notes

**Dropdown list:**

**Country – United States or U.S. Territory (Default)**



A dropdown menu with a blue header bar containing the text "United States or U.S. Territory". Below the header, a list of countries and territories is displayed in black text. The list includes: Afghanistan, Albania, Algeria, Andorra, Angola, Anguilla, Antarctica, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ashmore and Cartier Islands, Australia, Austria, Azerbaijan, Bahamas, the, Bahrain, Baker Island, Bangladesh, Barbados, Bassas da India, Basutoland, Belarus, Belgium, Belize, Benin, Benin, and Berlin, West. A vertical scrollbar is visible on the right side of the list.

**State/Territory**



A dropdown menu with a blue header bar containing a dash symbol "--". Below the header, a list of U.S. states and territories is displayed in black text. The list includes: Alabama, Alaska, American Samoa, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Marshall Islands, Maryland, Massachusetts, Michigan, Minnesota, and Mississippi. A vertical scrollbar is visible on the right side of the list.

## 30. Rental and Lease Income

This page collects and/or displays information regarding the type of Rental or Lease Income being alleged or received and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

### Rental Or Lease Income

<b>Name</b>	<b>Social Security Number (SSN)</b>	<b>Role</b> Claimant
-------------	-------------------------------------	-------------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income**
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Type** [More Info](#)

--

Select from favorites or type source information

[Show favorites](#)

**Description**

Unknown

**Source**

Unknown ID

**Address**

Country  
United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Unknown

**Contact**

**Phone**

U.S.  International

10-digit Number

**Monthly Values**

Alleged Gross or Verified Gross is required. Alleged Expenses or Verified Expenses is required [Net Rental Income Program \(NRIP\)](#)

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Gross Amount (\$)	Verified Gross Amount (\$)	Alleged Expenses Amount (\$)	Verified Expenses Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

**Dropdown list:**

**Type**

- 
- Land - not PESS
- Meets PESS criteria that produces non-business income
- Meets PESS criteria that represents government authority
- Other real property - not PESS
- Personal property - not PESS
- Sublet
- Other
- Unknown

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin West

## State/Territory

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 31. Other Income

This page collects and/or displays information regarding the type of “other income” being alleged or received and the amount. “Other Income” is any type of income that cannot be collected on any of the other income pages.

SSI Claims

Go To General Identification Living Arrangements Resources **Income** Benefit Leads Summary Claim Edits and Alerts

Other Income

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income**
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

**Type**

Indicates required information

Type:

Select from favorites or type source information

[Show favorites](#)

**Source**

Unknown

**Address**

Country:

Street 1:  Street 2:  Street 3:  Street 4:

City/Town:  State/Territory:  ZIP Code:

Unknown

**Contact**

**Phone**

U.S.  International

10-digit Number:

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

**Dropdown list:**

**Type**

- Alaska Longevity Bonus - countable
- Alaska Longevity Bonus - excludable
- Alaska Native Claims distribution over \$2,000 per year
- Austrian social insurance - certain payments not based on wage credits
- Cash
- Community service block grants assistance
- Death benefits - unspent
- Emergency assistance payments - not income or assistance based on need
- Gambling winnings or prizes
- Gifts
- Grants, fellowships, or scholarships not used for educational benefits
- Indian fishing rights income
- Indian tribal funds distributed to individuals
- Indian trust or restricted lands - derived from individual interest in excess of \$2,000 a year
- Inheritance - cash
- Inheritance - in-kind
- Insurance proceeds
- Job Corps dependents allowance
- Job Training Partnership Act
- Jury duty
- Money paid to residents of a public institution where no employer/employee relationship exists
- Remuneration from work - in-kind
- Settlements or awards
- Stipends
- Tips under \$20 monthly
- Trade Readjustment Act payments
- Uniformed Services special pay and allowances
- Unstated income
- Victims' compensation - State established fund exclusion

**Country – United States or U.S. Territory (Default)**

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin West

**State/Territory**

- 
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

## 32. Blind Countable Income

This page collects and/or displays information regarding the type of Blind Countable Income being alleged or received, and the amount.

SSI Claims
Go To ▾

● General Identification
 ● Living Arrangements
 ● Resources
 ○ Income
 ● Benefit Leads
 ○ Summary
 ○ Claim Edits and Alerts

Blind Countable Income

<b>Name</b>	<b>Social Security Number (SSN)</b>	<b>Role</b> Claimant
-------------	-------------------------------------	-------------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income**
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

\* Indicates required information

**Monthly Values**  
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Unknown	Countable Amount (\$)	Actions
				<input type="checkbox"/>		<a href="#">Delete</a>

✓ Show person remarks  
No remarks

✓ Show file documentation notes  
No notes

[Clear Page](#) [Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

### 33. Plan to Achieve Self-Support

This page collects and/or displays information regarding a Plan for Achieving Self-Support (PASS). The PASS is a disabled or blind person's work goal to achieve self-support. Approved expense items used for a PASS program are deducted from earned income.

SSI Claims

Go To  General Identification  Living Arrangements  Resources  Income  Benefit Leads  Summary  Claim Edits and Alerts

Plan to Achieve Self-Support

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support**
- School Data
- Office of Child Support Enforcement Data

**Work goal**  
(250 characters maximum)

Characters remaining: 250

**Start month (mm/yyyy)**   
mm/yyyy

**Anticipated ending month and year (mm/yyyy)**   
mm/yyyy

**PASS approved**  
 Yes  No

**Notice date (mm/dd/yyyy)**  
  
mm/dd/yyyy

Show person remarks  
No remarks

Show file documentation notes  
No notes

## 34. School Data

This page collects information regarding school attendance and student status for individuals (both eligible and ineligible) who are under age 22 and attending school regularly. This information is used to determine whether a student qualifies for the Student Earned Income Exclusion. This information is also used to determine if a child who is a student, between 18 and 22, not married, not eligible for SSI and living in the household of the claimant, is an ineligible child for inclusion in the deeming process.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### School Data

Name	Social Security Number (SSN)	Role
		Claimant

**Income**

- Income Selection
- Wages
  - Quarterly Wages Summary
  - Substantial Gainful Activity
  - Work Expenses
    - Work Expenses Summary
  - Unemployment Compensation
  - Black Lung Benefits
  - Office of Personnel Management Benefits
  - Railroad Board Benefits
  - Veterans Affairs Payments
  - Pensions, Annuities, Retirement, and Disability Payments
  - Interest
  - Dividends
  - Royalties and Honoraria (Unearned)
  - Rental and Lease Income
  - Other Income
  - Blind Countable Income
  - Plan to Achieve Self-Support
- School Data
  - Office of Child Support Enforcement Data

\* Indicates required information

**Collect school data** [More Info](#)

Yes  No  Decide later

**Show person remarks**

No remarks

**Show file documentation notes**

No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

# Screenshot – Collect School Data - Yes

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

### School Data

Name	Social Security Number (SSN)	Role Claimant

**Income**

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

**Collect school data** [More Info](#)

Yes    No    Decide later

Select from favorites or type school information  
[Show favorites](#)

**School name**

Name of school, home school curriculum name, etc.

---

**Address**

Country  
United States or U.S. Territory

Street 1   Street 2   Street 3   Street 4

City/Town   State/Territory   ZIP Code



---

**Contact**



---

**Phone**

U.S.    International

10-digit Number



---

**Dates of Attendance**

Date From (mm/yyyy)	Date To (mm/yyyy)	Unknown	Actions
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="button" value="Delete"/>

---

**Course of study**


---

**Hours per week**


---

**Student Status Determination**

Date From (mm/yyyy)	Date To (mm/yyyy)	Child is a Student	Unknown	Actions
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="button" value="Delete"/>

---

**Student enrollment verified**

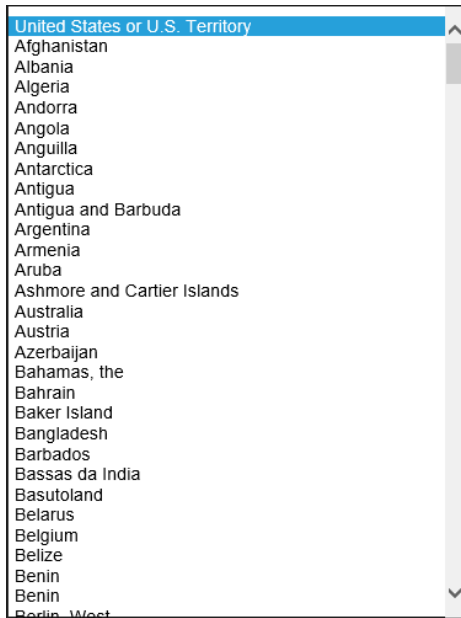
Yes    No

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

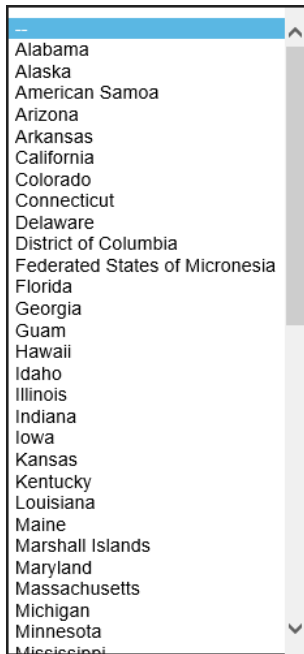
**Dropdown list:**

**Country – United States or U.S. Territory (Default)**



A dropdown menu with a blue header bar containing the text "United States or U.S. Territory". Below the header, a list of countries and territories is displayed in a standard black font. The list includes: Afghanistan, Albania, Algeria, Andorra, Angola, Anguilla, Antarctica, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ashmore and Cartier Islands, Australia, Austria, Azerbaijan, Bahamas, the, Bahrain, Baker Island, Bangladesh, Barbados, Bassas da India, Basutoland, Belarus, Belgium, Belize, Benin, Benin, and Berlin, West. A vertical scrollbar is visible on the right side of the list.

**State/Territory**



A dropdown menu with a blue header bar containing a dash symbol "--". Below the header, a list of U.S. states and territories is displayed in a standard black font. The list includes: Alabama, Alaska, American Samoa, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Marshall Islands, Maryland, Massachusetts, Michigan, Minnesota, and Mississippi. A vertical scrollbar is visible on the right side of the list.

## 35. Office of Child Support Enforcement Data

Child Support Enforcement is a mini-path function in SSI Claims system. Upon accessing the Child Support Enforcement function, the user is directed to query page containing data from the Office of Child Support Enforcement (OCSE). The ICSE function links to the OCSE Query pages, which house data from the National Directory of New Hires (NDNH). OCSE controls and maintains the data in NDNH.

The Child Support Enforcement function is automatically placed in the SSI Claims system path when required by current Policy in Initial Claims events and is available to the user in other SSI Claims system events upon request. The Child Support Enforcement page allows the user to retrieve and view New Hire, Wage, and Unemployment data directly from NDNH without having to exit the SSI Claims system.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Child Support Enforcement Data

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Blind Countable Income
- Plan to Achieve Self-Support
- Office of Child Support Enforcement Data

Office of Child Support Enforcement (OCSE) Data

Jump to report section [ ] Go

New Hire No data to display

Back to Top

Wages No data to display

Back to Top

Unemployment No data to display

Next Previous Save & Exit

### Dropdown list:

Jump to report section

Wages  
Unemployment

# F. Benefit Leads

## 1. Potential Eligibility for Other Benefits Selection

This page collects the claimant and claimant spouse's allegation regarding their prior involvement with military service, work for railroad, federal, state, or local government, work under a union or private pension plan, and potential eligibility under a foreign government's social security system or pension plan. It also collects the claimant and claimant spouse's allegations as to their spouse, former spouse, or parent's prior involvement with military service, work for railroad, federal, state, or local government, work under a union or private pension plan and potential eligibility under a foreign government's social security system or pension plan. It also inquires about their eligibility for Supplemental Nutrition Assistance Program (SNAP), Medicaid, health expenses and third party liability coverage.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Potential Eligibility for Other Benefits Selection

Name	Social Security Number (SSN)	Role
		Claimant

**Benefit Leads**

Benefit Lead Selection

Title II Disability

**Benefit Leads**

\* Indicates required information

**Supplemental Nutrition Assistance Program (SNAP)**  
Select yes to collect information from the claimant about SNAP, formerly the Food Stamp program

Yes  No

**Health Expenses**  
Select yes to collect information from the claimant and claimant spouse about any health expenses, third party insurance or unpaid medical expenses

Yes  No

**Did you, your spouse, a former spouse, child or parent (if you are filing as a child) ever:**

**Serve in the military** [Check DRAMS/VBAQ](#)

Yes  No  Unknown

**Work in the railroad industry**

Yes  No  Unknown

**Work for the federal government**

Yes  No  Unknown

**Work for a state or local government**

Yes  No  Unknown

**Belong to a union with a pension plan**

Yes  No  Unknown

**Work for a private employer with a pension plan**  
Include work for a private employer with a pension plan or other benefit plan

Yes  No  Unknown

**Have coverage or become eligible under a social security or pension plan of a country other than the U.S.**  
Include potential eligibility for foreign benefits based on citizenship, residency or work covered under a foreign country with a social security program

Yes  No  Unknown

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

## 2. Supplemental Nutrition Assistance Program (SNAP)

The Supplemental Nutrition Assistance Program (SNAP) page exists in the Supplemental Security Income (SSI) application, and allows the user to collect data used to determine whether or not:

- A claimant wants to file for SNAP
- SSA can take the claimant's SNAP application
- A claimant wants to file their SNAP application at the SSA Field Office

SNAP data is collected for the eligible individual. SNAP eligibility is determined based on the household as the entity and not an individual, so this page only appears once, even if a couple is filing.

When a claimant does not wish to file for assistance at the SSA office, an explanation is recorded for policy documentation, and does not appear on their application.

The screenshot shows the 'Supplemental Nutrition Assistance Program (SNAP)' form within the 'SSI Claims' application. The breadcrumb trail includes: Home > Go To > General Identification > Living Arrangements > Resources > Income > Benefit Leads > Summary > Claim Edits and Alerts. The form title is 'Supplemental Nutrition Assistance Program (SNAP)' with a subtitle 'Record eligibility information about SNAP (formerly known as the food stamp program)'. A table at the top has columns for Name, Social Security Number (SSN), and Role (Claimant). On the left, a 'Benefit Leads' sidebar lists: Benefit Lead Selection (selected), Supplemental Nutritional Assist. Prog., Health Expenses/Liability, Social Security, Title II Retirement (2), Retirement and Disability (5), and Title II from Spouse (6). The main form area contains several sections with radio button options: 'SNAP status' (Currently receiving SNAP benefits, Filed within the past 60 days, Never filed or file date more than 60 days in the past, Unknown), 'Recertification notice received within past 30 days' (Yes, No, Unknown), 'All household members applying for or receiving SSI' (Yes, No, Pre-release, Unknown), and 'May I take your SNAP application today?' (Yes, No, Unknown). A yellow warning box states 'Most recent application date must be entered'. Below this is a field for 'Last SNAP application or recertification date' (mm/dd/yyyy). Further down are sections for 'Combined Application Project (CAP) data' (Shelter cost at or above state standard: Yes, No, Cap does not apply) and 'Subsidized housing with heat included in rent' (Yes, No, Not a resident of NY). At the bottom, there are expandable sections for 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). 'Undo Changes' and 'Delete' buttons are at the bottom center. The footer shows 'Next', 'Previous', and 'Save & Print' buttons.

**More Info link:**

**Combined Application Project (CAP): More Information** ✕

The Combined Application Project (CAP) is an agreement between some states, SSA, and the Food and Nutrition Service (FNS) to test streamlined procedures for applying for SNAP through SSA. Complete this question if the state of residence is in one of the CAP states. CAP States are: Arizona, Kentucky, Louisiana, Maryland, Michigan, Mississippi, North Carolina, Pennsylvania, South Carolina, New York, South Dakota, Texas, Virginia, Florida, Massachusetts, and Washington.

Close

**Shelter Cost: More Information** ✕

Only for CAP States

Close

**Subsidized Housing: More Information** ✕

Only for Residents of New York State: Enter whether the claimant is living in subsidized housing with heat included in the rent if the claimant is eligible for CAP.

Close

### 3. Health Expenses and Third Party Liability

The Health Expenses and Third Party Liability page allows the user to collect data pertaining to: (Optional for a deferred claim)

- A client's eligibility for Medicaid coverage
- A client's third party insurance coverage and who is the owner of the policy.
- Information pertaining to an insurance claim or legal action that the claimant may have filed or has pending

The screenshot shows the 'Health Expenses and Third Party Liability' form within the SSI Claims application. The top navigation bar includes 'Go To', 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The form title is 'Health Expenses and Third Party Liability'. It features a table with columns for 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. On the left, a 'Benefit Leads' sidebar lists 'Benefit Lead Selection' (checked), 'Supplemental Nutritional Assist. Prog.' (checked), and 'Health Expenses/Liability' (selected). Below this are radio button options for various categories: Title II Disability, Military, Railroad, Federal Government, State/Local Government, Union, Private Employment, and Foreign Country. The main form area contains two required questions: 'Any unpaid medical expenses from 01/2021 through 03/2021' and 'Agree to assign rights to payments for medical support and medical care to the state Medicaid agency'. Both have radio button options for Yes, No, Automatic Assignment, and Unknown. There are also expandable sections for 'Show person remarks' and 'Show file documentation notes', both currently showing 'No remarks' and 'No notes' respectively. At the bottom left are 'Next', 'Previous', and 'Save & Exit' buttons. At the bottom right are 'Clear Page' and 'Delete' buttons.

## 4. Social Security Lead

The Social Security Lead page collects information about the claimant or his/her spouse's, former spouse's or parent's social security coverage. The information collected on this page is used to decide if the user should refer the claimant to file and pursue Title II benefits.

This screen is a read-only screen.

The screenshot shows the 'Social Security Lead' page within the 'SSI Claims' system. The top navigation bar includes 'Go To' and several menu items: 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads' (which is highlighted), 'Summary', and 'Claim Edits and Alerts'. Below the navigation bar, the page title 'Social Security Lead' is displayed. A table header shows 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. The main content area is divided into two sections. On the left, under 'Benefit Leads', there is a list of options: 'Benefit Lead Selection' (selected), 'Supplemental Nutritional Assist. Prog.', 'Health Expenses/Liability', 'Social Security', 'Title II Retirement (2)', 'Retirement and Disability (5)', and 'Title II from Spouse (6)'. On the right, under 'Relationship to claimant', the value is 'Self'. Below this, 'Person with Social Security coverage' is empty. 'Potential entitlement to Social Security' is 'No'. 'Reason' is empty. 'Lead status' is 'No entry'. There are two expandable sections: 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). At the bottom left, there are three buttons: 'Next', 'Previous', and 'Save & Exit'.

## 5. Disability Entitlement

The Disability Entitlement page exists in the SSI Claims System to explore potential entitlement to Disability benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

The screenshot shows the 'Disability Entitlement' page in the SSI Claims System. At the top, there is a navigation bar with tabs for 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads' (selected), 'Summary', and 'Claim Edits and Alerts'. Below the navigation bar, the page title 'Disability Entitlement' is displayed. The main content area is divided into two columns. The left column contains a 'Benefit Leads' section with a list of options: 'Benefit Lead Selection' (checked), 'Supplemental Nutritional Assist. Prog.' (checked), 'Health Expenses/Liability' (checked), 'Title II Disability' (unchecked), 'Military' (unchecked), 'Railroad' (unchecked), 'Federal Government' (unchecked), 'State/Local Government' (unchecked), 'Union' (unchecked), 'Private Employment' (unchecked), and 'Foreign Country' (unchecked). Below this list are three buttons: 'Next', 'Previous', and 'Save & Exit'. The right column contains a form with a red asterisk indicating required information. The form has a section for 'Potential entitlement on' with a red asterisk and the text 'Already entitled to maximum benefits at the earliest month or entitled to higher benefits on another record at the earliest month'. Below this text are two radio buttons: 'Yes' and 'No'. There are also two expandable sections: 'Show person remarks' with the text 'No remarks' and 'Show file documentation notes' with the text 'No notes'. A 'Clear Page' button is located at the bottom of the form.

### **Dropdown list:**

Reason not entitled

The screenshot shows a dropdown list with a blue header bar. The list contains four options: 'Never worked', 'No work since prior denial', 'Refused to file', and 'None apply'.

## 6. Child's Entitlement from Parents

The Child's Entitlement from Parents page exists in SSI Claims system to explore the claimant's potential entitlement to auxiliary or survivor benefits from the claimant's parents. All previous MSSICS screens of Child's Entitlement from Father and Child's Entitlement from Mother will be converted to Child's Entitlement from Parents.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | **Benefit Leads** | Summary | Claim Edits and Alerts

Child's Entitlement from Parents

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

**Benefit Leads**

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Title II from Parents**
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

**Potential entitlement on**

**\*Already entitled to maximum benefits at the earliest month or entitled to higher benefits on another record at the earliest month**

Yes  No

**\*Reason not entitled**

--

**Show person remarks**  
No remarks

**Show file documentation notes**  
No notes

Clear Page

Next Previous Save & Exit

### Dropdown list:

--

- Claimant married to a non RSDI beneficiary
- Parent neither deceased nor entitled
- Refused to file
- None apply

## 7. Retirement Entitlement

The Retirement Entitlement page exists in the Supplemental Security Income (SSI) application to explore potential entitlement to Retirement benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

The screenshot shows the 'Retirement Entitlement' page in the SSI Claims application. The top navigation bar includes 'Go To' and several menu items: 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The 'Benefit Leads' section on the left lists several options, with 'Benefit Lead Selection' selected. The main content area is titled 'Retirement Entitlement' and contains a table with columns for 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. Below the table, there are sections for 'Benefit Leads', 'Potential entitlement on', and 'Reason not entitled'. The 'Potential entitlement on' section has a radio button for 'No' selected. The 'Reason not entitled' section has a dropdown menu with a '-' sign. There are also sections for 'Show person remarks' and 'Show file documentation notes', both with 'No remarks' and 'No notes' respectively. At the bottom, there are buttons for 'Next', 'Previous', 'Save & Exit', and 'Clear Page'.

### Dropdown list:

The screenshot shows a dropdown list with the following options:

- Never worked
- No work since prior denial
- Refused to file
- None apply

## 8. Retirement and Disability Entitlement

The Retirement and Disability Entitlement page exists in the SSI Claims System to explore potential entitlement to Retirement and Disability benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant and claimant spouse has pursued potential entitlement to these benefits. When a new event occurs (initial claim or redetermination) the user will be presented with Retirement entitlement and/or Disability entitlement pages in the path.

The screenshot shows the 'Retirement and Disability Entitlement' page in the SSI Claims System. The page has a navigation bar at the top with tabs for 'Go To', 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The 'Benefit Leads' tab is active. Below the navigation bar, there is a header section with 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. The main content area is divided into two columns. The left column, titled 'Benefit Leads', contains a list of options: 'Benefit Lead Selection' (selected), 'Supplemental Nutritional Assist. Prog.', 'Health Expenses/Liability', 'Retirement and Disability' (selected), 'Military', 'Railroad', 'Federal Government', 'State/Local Government', 'Union', 'Private Employment', and 'Foreign Country'. The right column contains a form with the following sections: 'Indicates required information', 'Potential entitlement on', 'Already entitled to maximum benefits at the earliest month or entitled to higher benefits on another record at the earliest month' (with radio buttons for 'Yes' and 'No', 'No' is selected), 'Reason not entitled' (with a dropdown menu), 'Show person remarks' (with 'No remarks'), and 'Show file documentation notes' (with 'No notes'). At the bottom of the form is an 'Undo Changes' button. At the bottom of the page are three buttons: 'Next', 'Previous', and 'Save & Exit'.

### Dropdown list:

The screenshot shows a dropdown list with the following options: 'Never worked', 'No work since prior denial', 'Refused to file', and 'None apply'.

## 9. Spouse or Surviving Spouse Entitlement

The Spouse or Surviving Spouse Entitlement page exists in the SSI Claims System to explore potential entitlement to spouse, widow, or widower's benefits. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits. The information displayed on this page is derived from the data added to the claims file through the Marriage Information section of the Marriage page when certain criteria is met.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Spouse or Surviving Spouse Entitlement

Name	Social Security Number (SSN)	Role
		Claimant

**Benefit Leads**

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Social Security
- Title II Retirement (2)
- Retirement and Disability (5)
- Title II from Spouse (6)

**Potential entitlement on**

\* Indicates required information

\* Already entitled to maximum benefits at the earliest month or entitled to higher benefits on another record at the earliest month

Yes  No

\* Reason not entitled

--

▼ Show person remarks  
No remarks

▼ Show file documentation notes  
No notes

Clear Page

Next Previous Save & Exit

### Dropdown list:

--

- Age requirement for claimant not met and no child of number holder in care
- Duration of marriage not met
- Spouse or divorced spouse not insured
- Spouse insured but not entitled
- Remarried prior to age 60 and not disabled
- Not disabled within 7 years (84 months) of spouse's death
- Not disabled within 7 years (84 months) of loss of parent's benefit
- Not disabled within 7 years (84 months) of disability cessation for Disabled Widow's Benefit
- Not eligible for independently divorced spouse benefits
- Refused to file
- None apply

## 10. Military Service

The Military Service page exists in the SSI Claims System to collect data on the military service of the claimant, spouse, former spouse or parent. The information is used to determine the claimant's potential eligibility for a military pension or Veterans Affairs (VA) benefits by generating a referral letter directing the claimant to pursue such potential entitlements.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### Military Service

Name	Social Security Number (SSN)	Role
		Claimant

#### Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

**Person with the military service** [Check DRAMS/VBAG](#)  
Select a person from the person list to populate information OR type in form fields below.

[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	<a href="#">Select</a>

**Name**

\* First  Middle  \* Last  Suffix   Unknown

SSN

\* Relationship

Service number

Claim status for military service benefits

\* Lead status

Diary Type  Diary date  mm/dd/yyyy

**VA or Dept. of Defense contact information**  
Select from favorites or type contact information  
[Show favorites](#)

Contact

Address

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Phone

Web address

**Military Service**

Branch of Service	Period or Length of Service	Actions
<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

**Dropdown list:**

Relationship

---
Self
Spouse
Former Spouse
Parent
Child
Unknown

Claim status for military service benefits

---
Never filed
Pending
Approved
Denied

Lead status

---
Referral at Interview
Referral by Mail
No Potential Eligibility
Unknown

Diary Type

---
FC - VA Compensation
FE - VA Pension
FL - Department of Defense

## 11. Railroad Employment

The Railroad Employment page exists in the SSI Claims system to explore potential entitlement to Railroad benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | **Benefit Leads** | Summary | Claim Edits and Alerts

### Railroad Employment

Name: \_\_\_\_\_ Social Security Number (SSN): \_\_\_\_\_ Role: Claimant

**Benefit Leads**

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

**Railroad employee**  
Select a person from the person list to populate information OR type in form fields below.

[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	<a href="#">Select</a>

**Name**

\* First:  Middle:  \* Last:  Suffix:   Unknown

SSN:

**Relationship**

--

Employment was less than 5 years

**Claim status for railroad employment benefits**

--

**Lead status**

--

**Diary date**

mm/dd/yyyy

**Railroad contact information**  
Select from favorites or type contact information

[Show favorites](#)

**Contact**  
Railroad Retirement Board

**Address**

Street 1:  Street 2:  Street 3:  Street 4:

City/Town:  State/Territory: --  ZIP Code:

**Phone**

**Web address**

**Employer**

Name of Employer	Period of Employment	Actions
<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

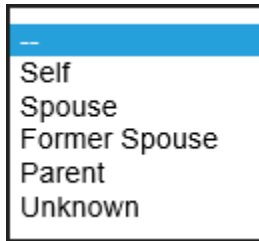
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

**Dropdown list**

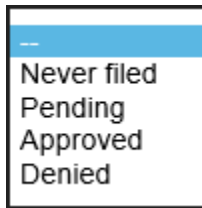
Relationship



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Self, Spouse, Former Spouse, Parent, and Unknown.

- Self
- Spouse
- Former Spouse
- Parent
- Unknown

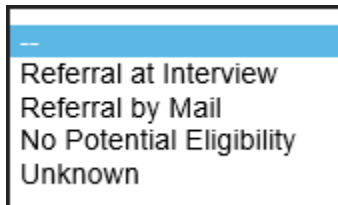
Claim status for military service benefits



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Never filed, Pending, Approved, and Denied.

- Never filed
- Pending
- Approved
- Denied

Lead status



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Referral at Interview, Referral by Mail, No Potential Eligibility, and Unknown.

- Referral at Interview
- Referral by Mail
- No Potential Eligibility
- Unknown

## 12. Federal Employment

The Federal Employment page exists in the SSI Claims System to collect data about the claimant's or someone else's (i.e., spouse, former spouse or parent's) work for the federal government. The information is used to assess the claimant's potential eligibility for other benefits by generating a referral letter directing the claimant to pursue potential entitlement to federal employment benefits.

SSI Claims

[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

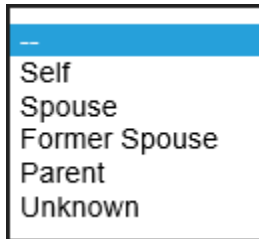
### Federal Employment

Name	Social Security Number (SSN)	Role	Claimant								
<p><b>Benefit Leads</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Benefit Lead Selection</li> <li><input checked="" type="checkbox"/> Supplemental Nutritional Assist. Prog.</li> <li><input checked="" type="checkbox"/> Health Expenses/Liability</li> <li><input checked="" type="checkbox"/> Title II Disability</li> <li><input checked="" type="checkbox"/> Military</li> <li><input checked="" type="checkbox"/> Railroad</li> <li><input type="checkbox"/> <b>Federal Government</b></li> <li><input type="checkbox"/> State/Local Government</li> <li><input type="checkbox"/> Union</li> <li><input type="checkbox"/> Private Employment</li> <li><input type="checkbox"/> Foreign Country</li> </ul>											
<p><b>Indicates required information</b></p> <p><b>Federal employee</b> Select a person from the person list to populate information OR type in form fields below.</p> <p><a href="#">Hide person list</a></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Name</th> <th style="width: 15%;">SSN</th> <th style="width: 15%;">Relationship</th> <th style="width: 20%;">Actions</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td style="text-align: center;">Self</td> <td style="text-align: center;"><a href="#">Select</a></td> </tr> </tbody> </table>				Name	SSN	Relationship	Actions			Self	<a href="#">Select</a>
Name	SSN	Relationship	Actions								
		Self	<a href="#">Select</a>								
<p><b>Name</b></p> <p>*First <input type="text"/> Middle <input type="text"/> *Last <input type="text"/> Suffix <input type="text"/> <span style="float: right;"><input type="checkbox"/> Unknown</span></p>											
<p><b>SSN</b></p> <p><input type="text"/></p>											
<p><b>Relationship</b></p> <p>-- <input type="text"/></p> <p><input type="checkbox"/> Employment was less than 5 years</p> <p><input type="checkbox"/> Withdrew contribution from pension plan and not entitled to annuity</p>											
<p><b>Claim status for federal employment benefits</b></p> <p>-- <input type="text"/></p>											
<p><b>Lead status</b></p> <p>-- <input type="text"/></p>											
<p><b>Diary date</b></p> <p><input type="text"/></p> <p>mm/dd/yyyy</p>											
<p><b>Federal government contact information</b></p> <p>Select from favorites or type contact information</p> <p><a href="#">Show favorites</a></p>											
<p><b>Contact</b></p> <p>Office of Personnel Management</p>											
<p><b>Address</b></p> <p>Street 1 <input type="text"/> Street 2 <input type="text"/> Street 3 <input type="text"/> Street 4 <input type="text"/></p> <p>City/Town <input type="text"/> State/Territory <input type="text"/> ZIP Code <input type="text"/></p>											
<p><b>Phone</b></p> <p><input type="text"/></p>											
<p><b>Web address</b></p> <p><input type="text"/></p>											
<p><b>Employer</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Name of Employer</th> <th style="width: 30%;">Period of Employment</th> <th style="width: 20%;">Actions</th> </tr> </thead> <tbody> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td style="text-align: center;"><a href="#">Delete</a></td> </tr> </tbody> </table>				Name of Employer	Period of Employment	Actions	<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>		
Name of Employer	Period of Employment	Actions									
<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>									
<p><a href="#">Show person remarks</a></p> <p>No remarks</p> <p><a href="#">Show file documentation notes</a></p> <p>No notes</p>											
<p><a href="#">Add Another</a> <a href="#">Clear Page</a> <a href="#">Delete</a></p>											

[Next](#)
[Previous](#)
[Save & Exit](#)

**Dropdown list**

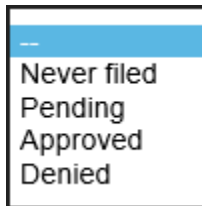
Relationship



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of relationship options: Self, Spouse, Former Spouse, Parent, and Unknown.

- Self
- Spouse
- Former Spouse
- Parent
- Unknown

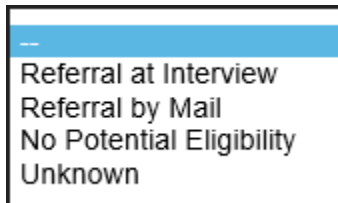
Claim status for military service benefits



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of claim status options: Never filed, Pending, Approved, and Denied.

- Never filed
- Pending
- Approved
- Denied

Lead status



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of lead status options: Referral at Interview, Referral by Mail, No Potential Eligibility, and Unknown.

- Referral at Interview
- Referral by Mail
- No Potential Eligibility
- Unknown

## 13. State or Local Government

The State or Local Employment page exists in the SSI Claims System to explore potential entitlement to State or Local benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

State or Local Government

Name Social Security Number (SSN) Role  
Claimant

**Benefit Leads**

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

**State or local government employee**  
Select a person from the person list to populate information OR type in form fields below.

Name	SSN	Relationship	Actions
		Self	Select

**Name**

\* First Middle \* Last Suffix  Unknown

SSN

**Relationship**

--

**Claim status for state or local government benefits**

--

**Lead status**

--

**Diary date**

mm/dd/yyyy

**State or local government contact information**  
Select from favorites or type contact information

[Show favorites](#)

**Contact**

**Address**

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

**Phone**

**Web address**

**Employer**

Name of Employer	Period of Employment	Actions
		Delete

[Show person remarks](#)  
No remarks

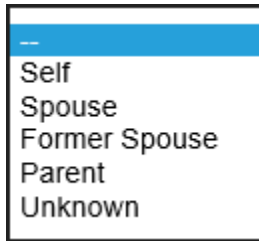
[Show file documentation notes](#)  
No notes

Add Another Clear Page Delete

Next Previous Save & Exit

**Dropdown list**

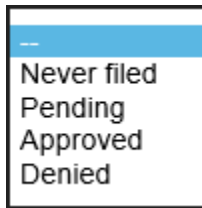
Relationship



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of relationship options: Self, Spouse, Former Spouse, Parent, and Unknown.

- Self
- Spouse
- Former Spouse
- Parent
- Unknown

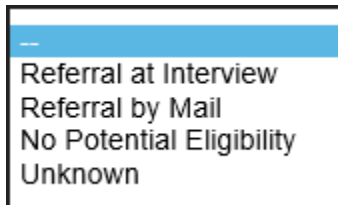
Claim status for state or local government benefits



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of claim status options: Never filed, Pending, Approved, and Denied.

- Never filed
- Pending
- Approved
- Denied

Lead status



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of lead status options: Referral at Interview, Referral by Mail, No Potential Eligibility, and Unknown.

- Referral at Interview
- Referral by Mail
- No Potential Eligibility
- Unknown

## 14. Union Membership

The Union Membership page exists in the SSI Claims System to explore potential entitlement to Union Membership benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### Union Membership

Name Social Security Number (SSN) Role  
Claimant

**Benefit Leads**

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

**Union member**  
Select a person from the person list to populate information OR type in form fields below.

[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	<a href="#">Select</a>

**Name**

\* First  Middle  \* Last  Suffix   Unknown

SSN

\* Relationship

Claim status for union benefits

\* Lead status

Diary date   
mm/dd/yyyy

**Union contact information**  
Select from favorites or type contact information  
[Show favorites](#)

Contact

**Address**

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

Phone

Web address

**Employer**

Name of Employer	Period of Employment	Actions
<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

[Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

**Dropdown list**

Relationship

—
Self
Spouse
Former Spouse
Parent
Unknown

Claim status for union benefits

—
Never filed
Pending
Approved
Denied

Lead status

—
Referral at Interview
Referral by Mail
No Potential Eligibility
Unknown

## 15. Private Employment

The Private Employment page exists in the SSI Claims System to collect data about the work history of the claimant, spouse, former spouse or parent. The information is used to determine eligibility for a pension plan from private employment by generating a referral letter directing the claimant to pursue potential entitlements.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Private Employment

Name Social Security Number (SSN) Role  
Claimant

**Benefit Leads**

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

**Employee**  
Select a person from the person list to populate information OR type in form fields below.

Name	SSN	Relationship	Actions
		Self	Select

**Name**  
\* Indicates required information

\* First Middle \* Last Suffix  
     Unknown

SSN

\* Relationship  
 --

Age 24 or younger during all periods of employment

**Claim status for private employment benefits**  
 --

\* Lead status  
 --

Diary date  
  
 mmddyyyy

**Employer contact information**  
 Select from favorites or type contact information  
[Show favorites](#)

Contact

**Address**  
 Country  
 United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

**Phone**  
 U.S.  International  
 10-digit Number

Web address

Name of Employer	Period of Employment	Actions
<input type="text"/>	<input type="text"/>	Delete

[Show person remarks](#)  
 No remarks

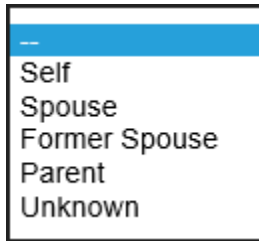
[Show file documentation notes](#)  
 No notes

Add Another Clear Page Delete

Next Previous Save & Exit

**Dropdown list**

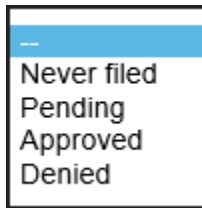
Relationship



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of relationship options: Self, Spouse, Former Spouse, Parent, and Unknown.

- Self
- Spouse
- Former Spouse
- Parent
- Unknown

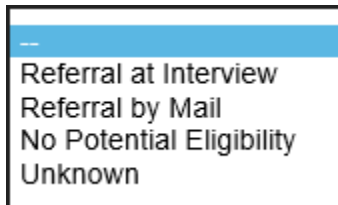
Claim status for private employment benefits



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of claim status options: Never filed, Pending, Approved, and Denied.

- Never filed
- Pending
- Approved
- Denied

Lead status



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of lead status options: Referral at Interview, Referral by Mail, No Potential Eligibility, and Unknown.

- Referral at Interview
- Referral by Mail
- No Potential Eligibility
- Unknown

## 16. Foreign Benefits

The Foreign Employment page exists in the SSI Claims system. This page collects data about the claimant's or someone else's (i.e., spouse, former spouse or parent's) work under a foreign government social security or pension plan. This information is used to assess the claimant's potential eligibility for other benefits by generating a referral letter directing the claimant to pursue potential entitlement to foreign employment benefits.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

### Foreign Benefits

Name Social Security Number (SSN) Role  
Claimant

#### Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

Include potential eligibility for foreign benefits based on citizenship, residency or work covered under a foreign country with a social security program

\* Indicates required information

**Person name**  
Select a person from the person list to populate information OR type in form fields below.

[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	<a href="#">Select</a>

**Name**

\* First  Middle  \* Last  Suffix   Unknown

SSN

\* Relationship

**Claim status for foreign benefits**

\* Lead status

Diary date   
mm/dd/yyyy

**Foreign benefit contact information**  
Select from favorites or type contact information  
[Show favorites](#)

Contact

**Address**  
Country   
United States or U.S. Territory

Street 1  Street 2  Street 3  Street 4

City/Town  State/Territory  ZIP Code

**Phone**  
 U.S.  International  
10-digit Number

Web address

**Period of Employment, residency or citizenship**

Period	Country	Actions
<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>

[Show person remarks](#)  
No remarks

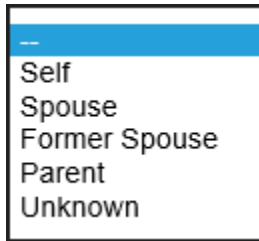
[Show file documentation notes](#)  
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

Next Previous Save & Exit

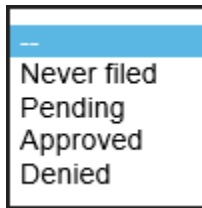
**Dropdown list**

Relationship



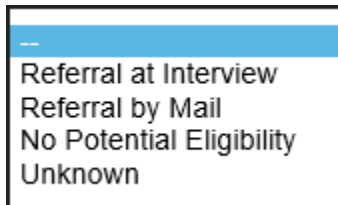
A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Self, Spouse, Former Spouse, Parent, and Unknown.

Claim status for foreign benefits



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Never filed, Pending, Approved, and Denied.

Lead status



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Referral at Interview, Referral by Mail, No Potential Eligibility, and Unknown.

# G. Summary

## 1. Living Arrangements Summary

Living Arrangements Summary is an optional page that provides a summary of the Living Arrangements data that have been collected in the detailed Living Arrangements pages for a Supplemental Security Income claimant and claimant spouse, if applicable.

All fields on the Living Arrangements Summary page are display only.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads **Summary** Claim Edits and Alerts

Living Arrangements Summary

Name	Social Security Number (SSN)	Role Claimant
Summary		
<input checked="" type="radio"/> Living Arrangements Summary		
<input type="radio"/> Resources Summary		
<input type="radio"/> Income Summary		

Effective Date	Federal Living Arrangement	Ineligibility Reason	State and County Code	Optional State Supplement Code	Intervening A or C Period	Chose Presumed Maximum Value (PMV)	Cash from Household	Actual ISM

Save & Exit

## 2. Resources Summary

Resources Summary is an optional page that provides a condensed display of the resource data that has been collected in the detailed resource data groups for a Supplemental Security Income (SSI) claimant or deemor. In addition, the person's countable resources are totaled in Resources Summary to aid Claims Representative's in their review of the claim or in performing manual resource deeming computations. Resources Summary is entirely propagated or derived and no data can be changed on this data group.

All fields on the Resources Summary page are display only.

SSI Claims

Go To  General Identification  Living Arrangements  Resources  Income  Benefit Leads  Summary Claim Edits and Alerts

Resources Summary

Name Social Security Number (SSN) Role Claimant

Summary

- Living Arrangements Summary
- Resources Summary
- Income Summary

Save & Exit

[Expand all](#)

Expand	Period	Page Name	Description	Monthly Countable Total (\$)
<input checked="" type="checkbox"/>				

### 3. Income Summary

Income Summary (ISUM) is an optional, display-only page. It displays limited information about a person's countable income for the past 26 months, the current month, and the future 14 months. The information displayed is from the person's detailed income records.

All fields on the Income Summary page are display only.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | **Summary** | Claim Edits and Alerts

#### Income Summary

Name	Social Security Number (SSN)	Role Claimant
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Summary

- Living Arrangements Summary
- Resources Summary
- Income Summary**

Save & Exit

Other Income

Cash

Start Date	End Date	Countable Amount (\$)
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